



Sex Offender Management Board Approved Provider List - By County



Adams

Living Hope

Name & Main Office Address: Michael Schneider, Ph.D.
2272 Chestnut
Quincy, IL 62301

Phone: (217) 641-0945

Fax: (217) 641-0945

Email: mikejoe@adams.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LPC #071-005940, Missouri #PY 01367

Midwest Counseling

Name & Main Office Address: Bryan Denure
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885

Fax:

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LPC #180-005002, CRADC

Name & Main Office Address: Keir L. Goatley
917 Clocktower Dr. #420
Springfield, IL 62704

Phone: (217) 726-8744

Fax:

Email: kgoatley@ameritech.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-#180-004321, (IDPR), CCBT, ATLSA, IL-ATSA

Name & Main Office Address: Gil Pilapil
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885

Fax:

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Alexander

Delta Center, Inc.

Name & Main Office Address: Wendy Ice
1400 Commercial Avenue
Cairo, IL 62914

Phone: (618) 734-2665 x258

Fax: (618) 734-1999

Email: wendie_ice@yahoo.com

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

First Judicial Circuit of Illinois-Probation & Court Services

Name & Main Office Address: Marlynn A. Frailey
201 W. Main
Marion, IL 62959

Phone: (618) 993-1840

Fax: (618) 993-1865

Email: mfrailey@firstcircuitprobation.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: CAC; IAODAPCA #6771



Sex Offender Management Board Approved Provider List - By County



Alexander

Massac County Mental Health

Name & Main Office Address: Patricia Gillespie
206 W. 5th Street
Metropolis, IL 62960

Phone: (618) 524-9368

Fax: (618) 524-9551

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: Sexual Abuse Treatment Counselor, BS, MHP,
17 yrs experience

Name & Main Office Address: Yvonne J. Rath
206 W. 5th Street
Metropolis, IL 62960

Phone: (618) 524-9368

Fax: (618) 524-9551

Email: mcmh@hcis.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, NCC, MAC, CCJS, PCGC, CARF,
Medicaid, Child Welfare, Substance Abuse -
Agency, Individual

Michael E. Althoff, Ph.D.

Name & Main Office Address: Michael E. Althoff, Ph.D.
201 E. Main, Suite 3D
Carbondale, IL 62901

Phone: (618) 549-3587

Fax: (618) 549-2695

Email: mealthoff@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, IL Clinical Member - ATSA

Bond

Alternatives Counseling, Inc.

Name & Main Office Address: Donya Adkerson, MA
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085

Fax: (618) 288-8959

Email: donya2@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-000271

Name & Main Office Address: Bethany A. Munge, M.A., Q.M.H.P.
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085 x202

Fax: (618) 288-8959

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Darlene M. Bushue, M.A., LCPC

Name & Main Office Address: #Error

Phone: (618) 444-7736

Fax:

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC 180-004485



Sex Offender Management Board Approved Provider List - By County



Boone

Brown Counseling & Consulting

Name & Main Office Address: Jeffrey R. Brown
2622 Washington Avenue
Vincennes, IN 47591

Phone: (812) 887-5431
Fax: (812) 886-3010
Email: lazlo81@charter.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: ACSW; LCSW, IL #148-008300 & IN #34001119A; CADC III; ATSA

Centegral HealthSystem/Horizons

Name & Main Office Address: Robert Meyer
527 W. South Street
Woodstock, IL 60098

Phone: (815) 338-9199
Fax: (815) 338-9205
Email: rmeyer3@charter.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: Ph.D., LCP, Fellow Academy of Forensic Psychologist

Community Counseling Center, Ltd.

Name & Main Office Address: Jeffrey A. Martin
666 Russell Court, Suite 105
Woodstock, IL 60098

Phone: (815) 338-7749
Fax: (815) 338-7728
Email: ccc@imaxx.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW 149-003373

Forensic Psych Associates, Ltd.

Name & Main Office Address: Robert H. Gordon, Ph.D.
203 N. LaSalle Street, #2100
Chicago, IL 60601

Phone: (312) 917-1610
Fax: (608) 756-5174
Email: rgordon@forensicpsych.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP

Glenwood Testing Center

Name & Main Office Address: Frank E. Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-8133
Fax: (815) 968-4656
Email: fec@juno.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP #071-002590

Name & Main Office Address: Kyle Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-5342
Fax: (815) 968-4656
Email: drcushing@juno.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP, Consulting Forensic Examiner



Sex Offender Management Board Approved Provider List - By County



Boone

Jeffrey B. Sundberg

Name & Main Office Address: Jeffrey B. Sundberg
P. O. Box 17044, 610 A East State Street
Rockford, IL 61110

Phone: (815) 332-8342

Fax: (815) 332-8342

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-003876, ACSW, ATSA Member

Northwest Treatment Associates

Name & Main Office Address: Carol Fetzner
645 McHenry Avenue
Woodstock, IL 60098

Phone: (815) 337-1234

Fax: (815) 337-5653

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-000371, NCC 27767

Name & Main Office Address: Patrick C. Littlejohn, MA, NCC, LCPC
645 McHenry Avenue
Woodstock, IL 60098

Phone: (815) 337-1234

Fax: (847) 608-8570

Email: pclittlejohn@hotmail.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, National Certified Counselor, Clinical Member-ATSA

Name & Main Office Address: Bonnie E. Marable
645 McHenry Avenue
Woodstock, IL 60098

Phone: (815) 337-1234

Fax: (847) 608-8572

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-006480; IN Psychologist

Name & Main Office Address: Cheryl R. Runion
1185 Dundee Avenue, E-1
Elgin, IL 60120

Phone: (847) 608-8570

Fax: (847) 608-8576

Email: j.runion@comcast.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, CADC, CCJP, NCC

Name & Main Office Address: Dr. Jim Webster, PsyD
1185 Dundee Avenue, E-1
Elgin, IL 60120

Phone: (815) 337-1234

Fax: (815) 337-5653

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

RITAS Ministry

Name & Main Office Address: Judith "Jude" C. Skallerup
325 E. Galena
Aurora, IL 60505

Phone: (630) 966-0252

Fax: (630) 966-0005

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-004615, CSOTS



Sex Offender Management Board Approved Provider List - By County



Boone

Welch, Psy.D., William H.

Name & Main Office Address: William H. Welch, Psy.D.
810 E. State Street, Suite 304
Rockford, IL 61104

Phone: (815) 316-7604

Fax: (815) 316-7614

Email: neuropsychd@gmail.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, ATSA Clinical Member, IL ATSA, CSOTS

Bureau

7th Fire Counseling

Name & Main Office Address: Leo J. Meagher
218 W. Madison Street
Ottawa, IL 61350

Phone: (815) 433-4829

Fax: (815) 433-4028

Email: chawk@mtco.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, Clinically Cert. Forensic Counselor, Clinically Cert. DV Counselor, Cert. Clinical Criminal Justice Specialist, Master Addiction Counselor, Cert. Diplomate in Clinical Hypnothe

Alliances Counseling Services

Name & Main Office Address: Ronelle Allen
119 W. First Street, Suite 110
Dixon, IL 61021

Phone: (815) 285-3073

Fax: (815) 285-3103

Email: alliances@cin.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

Name & Main Office Address: Brian Smith
119 W. First Street, Suite 110
Dixon, IL 61021

Phone: (815) 285-3073

Fax: (815) 285-3103

Email: alliances@cin.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW

Family Services Agency of DeKalb County, Inc.

Name & Main Office Address: Kathleen M. Alberts, MSW, LCPC
14 Health Services Drive
DeKalb, IL 60115

Phone: (815) 758-8618

Fax: (815) 758-7569

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-004462; Certified Sex Offender Tx Specialist

Family, Divorce & Mediation of Ogle County

Name & Main Office Address: Kathleen M. Alberts, MSW, LCPC
1500 West Lincoln Avenue
Rochelle, IL 61068

Phone: (815) 562-8818

Fax: (815) 562-8818

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-004462; Certified Sex Offender Tx Specialist



Sex Offender Management Board Approved Provider List - By County



Bureau

Youth Service Bureau of Illinois Valley

Name & Main Office Address: Lisa Kay Gustafson
424 W. Madison
Ottawa, IL 61350

Phone: (815) 433-3953
Fax: (815) 433-3980
Email: lisa@ysbiv.org
Language(s): English
Licenses: IL LCPC #180-004529

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Cynthia Robinson
424 W. Madison
Ottawa, IL 61350

Phone: (815) 433-3953
Fax: (815) 433-3980
Email: cindy@ysbiv.org
Language(s): English
Licenses: IL LCSW #149-007877

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Calhoun

Alternatives Counseling, Inc.

Name & Main Office Address: Donya Adkerson, MA
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085
Fax: (618) 288-8959
Email: donya2@aol.com
Language(s): English
Licenses: IL LCPC-180-000271

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Bethany A. Munge, M.A., Q.M.H.P.
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085 x202
Fax: (618) 288-8959
Email:
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Darlene M. Bushue, M.A., LCPC

Name & Main Office Address: #Error

Phone: (618) 444-7736
Fax:
Email:
Language(s): English
Licenses: IL LCPC 180-004485

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Carroll

Alliances Counseling Services

Name & Main Office Address: Ronelle Allen
119 W. First Street, Suite 110
Dixon, IL 61021

Phone: (815) 285-3073
Fax: (815) 285-3103
Email: alliances@cin.net
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Carroll

Alliances Counseling Services

Name & Main Office Address: Brian Smith
119 W. First Street, Suite 110
Dixon, IL 61021

Phone: (815) 285-3073
Fax: (815) 285-3103
Email: alliances@cin.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW

Family Services Agency of DeKalb County, Inc.

Name & Main Office Address: Kathleen M. Alberts, MSW, LCPC
14 Health Services Drive
DeKalb, IL 60115

Phone: (815) 758-8618
Fax: (815) 758-7569
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC #180-004462; Certified Sex Offender
Tx Specialist

Glenwood Testing Center

Name & Main Office Address: Frank E. Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-8133
Fax: (815) 968-4656
Email: fec@juno.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP #071-002590

Name & Main Office Address: Kyle Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-5342
Fax: (815) 968-4656
Email: drcushing@juno.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP, Consulting Forensic Examiner

Jeffrey B. Sundberg

Name & Main Office Address: Jeffrey B. Sundberg
P. O. Box 17044, 610 A East State Street
Rockford, IL 61110

Phone: (815) 332-8342
Fax: (815) 332-8342
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW #149-003876, ACSW, ATSA Member

Cass

Clinical Systems, Inc.

Name & Main Office Address: Louis M. Douglas
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142
Fax:
Email: ldouglas@insightbb.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: LPC, CADC, CCJP, MISA II



Sex Offender Management Board Approved Provider List - By County



Cass

Clinical Systems, Inc.

Name & Main Office Address: Michael G. Howie
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142
Fax: (217) 529-2174
Email: mhowie1@earthlink.net
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Karen L. Streight
3151 Butler
Springfield, IL 62703

Phone: (271) 529-2142
Fax: (217) 529-2174
Email: clinicalsystems@yahoo.com
Language(s): English
Licenses: IL LCPC #180-003070

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Gregory S. Viniard

Name & Main Office Address: Gregory S. Viniard
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142
Fax: (217) 529-2174
Email:
Language(s): English
Licenses: IL LCPC #180-003061, Clinically Certified
Forensic Counselor #F18393, Clinically
Certified DV Counselor #F18394

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Terry D. Campbell, MS

Name & Main Office Address: Terry D. Campbell, MS
P.O. Box 17
Sherman, IL 62684

Phone: (217) 566-2552
Fax: (217) 566-2552
Email: campbell@warpsnet.net
Language(s): English
Licenses: IL LPC-#180-005797

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Champaign

Art Therapy and Counseling Services

Name & Main Office Address: Laurie A. Cox
101 E. College Avenue, Suite D
Normal, IL 61761

Phone: (309) 452-5326
Fax: (309) 452-5356
Email: coxlaurie@msn.com
Language(s): English
Licenses: IL LCPC, CADC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Bohlen & Associates, SC

Name & Main Office Address: Joseph G. Bohlen, MD, Ph.D.
3001 Spring Mill Drive, Suite D
Springfield, IL 62704

Phone: (217) 546-3100
Fax: (217) 546-3284
Email:
Language(s): English
Licenses: IL Physicians & Surgeons

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Champaign

Community Resource and Counseling Center

Name & Main Office Address: Laurelyn Cropek
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302

Fax: (217) 379-4304

Email: crcc@illicom.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-149-005667

Name & Main Office Address: Laurie A. Gilbert
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302

Fax: (217) 379-4304

Email: lgilbert@4crcc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-149-010484

Name & Main Office Address: Christine Mayer
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302

Fax: (217) 379-4304

Email: ccrc@illicom.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-149.009275

Name & Main Office Address: Jeffrey C. Reynolds
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302

Fax: (217) 379-4304

Email: jreynolds@4crcc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-004199

Kleppin, MS.Ed., LCPC, CADC, Kleppin

Name & Main Office Address: Michael Kleppin, MS.Ed., LCPC, CADC
P. O. Box 416
Saboy, IL 61874

Phone: (217) 398-0413

Fax: (217) 239-6616

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-#180-005001, CADC

Kling, Joanna M.Ed., LCPC

Name & Main Office Address: Joanna Kling, M.Ed., LCPC
507 W. Springfield Avenue
Urbana, IL 61801

Phone: (217) 344-4722

Fax: (217) 344-4733

Email: jokling611@insightbb.com

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, NBCC



Sex Offender Management Board Approved Provider List - By County



Champaign

Onarga Academy

Name & Main Office Address:	Rebecca Cunningham 104 N. Locust Onarga, IL 60955	Phone: (815) 268-4001 Fax: (815) 268-7977 Email: rcunnin@nexus-ona.org Language(s): English Licenses: IL LCPC #180-001150
<i>Services Provided:</i>		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	William D. Featherstone 104 N. Locust Onarga, IL 60955	Phone: (815) 268-4001 Fax: (815) 268-7977 Email: bfeathe@nexus-ona.org Language(s): English Licenses:
<i>Services Provided:</i>		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Douglas C. Gossett, M.A., LCPC 104 N. Locust Onarga, IL 60955	Phone: (815) 268-4001 Fax: (815) 268-7977 Email: dgossset@nexus-ona.org Language(s): English Licenses: IL LCPC #180-005298
<i>Services Provided:</i>		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Jamie Kozma 104 N. Locust Onarga, IL 60955	Phone: (815) 268-4001 Fax: (815) 268-7977 Email: jkozma@nexus-ona.org Language(s): English Licenses: IL LCPC
<i>Services Provided:</i>		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Bill Mitchell 104 N. Locust Onarga, IL 60955	Phone: (815) 268-4001 Fax: (815) 268-7977 Email: wmitche@nexus-ona.org Language(s): English Licenses: None
<i>Services Provided:</i>		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Karen Robertie 104 N. Locust Onarga, IL 60955	Phone: (815) 268-4001 Fax: (815) 268-7977 Email: krobert@nexus-ona.org Language(s): English Licenses: IL LCPC 180-005314
<i>Services Provided:</i>		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Michael D. Simpson 104 N. Locust Onarga, IL 60955	Phone: (815) 268-4001 Fax: (815) 268-7977 Email: msimpso@nexus-ona.org Language(s): English Licenses: IL LCPC 180-005921
<i>Services Provided:</i>		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes



Sex Offender Management Board Approved Provider List - By County



Champaign

Onarga Academy

Name & Main Office Address:	Tricia Renee St. Pierre 104 N. Locust Onarga, IL 60955	Phone: (815) 268-4001 Fax: (815) 268-7977 Email: tstpier@nexus-ona.org Language(s): English Licenses: NCC
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? Yes
Adult ?	No	All applicant attestation qualifications? Yes
Juvenile ?	Yes	

Name & Main Office Address:	Ryan Weidenbenner 104 N. Locust Onarga, IL 60955	Phone: (815) 268-4001 Fax: (815) 268-7977 Email: rweiden@nexus-ong.org Language(s): English Licenses: IL LCPC
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? Yes
Adult ?	No	All applicant attestation qualifications? Yes
Juvenile ?	Yes	

Name & Main Office Address:	Timothy E. White 104 N. Locust Onarga, IL 60955	Phone: (815) 268-4001 Fax: (815) 268-7977 Email: twhite@nexus-ona.org Language(s): English Licenses: None
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? Yes
Adult ?	No	All applicant attestation qualifications? Yes
Juvenile ?	Yes	

Psychological & Counseling Center

Name & Main Office Address:	Ronald Matthew N7193 3rd Court Westfield, WI 53964	Phone: (715) 347-1311 Fax: (715) 344-8127 Email: ronlewmatt@yahoo.com Language(s): English Licenses: IL #071-002091, WI #2434-057
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? Yes
Adult ?	Yes	All applicant attestation qualifications? Yes
Juvenile ?	Yes	

William "Kip" Hillman, Psy.D.

Name & Main Office Address:	William "Kip" Hillman, Psy.D. 4064 N. Lincoln, #290 Chicago, IL 60618	Phone: (312) 933-0060 Fax: (773) 989-0275 Email: kiphillman@yahoo.com Language(s): English Licenses: IL Psychology 071-003686
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? Yes
Adult ?	Yes	All applicant attestation qualifications? Yes
Juvenile ?	Yes	

Christian

Christian County Mental Health

Name & Main Office Address:	Joan M. Collodi, M.A., LCPC 430 N. Pawnee Taylorville, IL 62568	Phone: (217) 824-4905 Fax: (217) 824-4905 Email: Language(s): English Licenses: IL LCPC
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? No
Adult ?	Yes	All applicant attestation qualifications? Yes
Juvenile ?	No	



Sex Offender Management Board Approved Provider List - By County



Christian

Clinical Systems, Inc.

Name & Main Office Address: Louis M. Douglas
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142

Fax:

Email: ldouglas@insightbb.com

Language(s): English

Licenses: LPC, CADC, CCJP, MISA II

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Michael G. Howie
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142

Fax: (217) 529-2174

Email: mhowie1@earthlink.net

Language(s): English

Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Karen L. Streight
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142

Fax: (217) 529-2174

Email: clinicalsystems@yahoo.com

Language(s): English

Licenses: IL LCPC #180-003070

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Cokley, Sunderland & Cokley

Name & Main Office Address: Robert L. Cokley, Ph.D.
348 West Prairie Avenue, Suite
Decatur, IL 62522

Phone: (217) 422-0053

Fax: (217) 422-0374

Email:

Language(s): English

Licenses: IL LCSW- #149-000865, Doctorate

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Effingham County Probation Office

Name & Main Office Address: Sandy Taylor, MS, LCPC
106 N. Third Street
Effingham, IL 62401-3456

Phone: (217) 347-7931

Fax: (217) 347-2001

Email: sandy_taylor9@yahoo.com

Language(s): English

Licenses: IL LCPC #180-005527

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Gregory S. Viniard

Name & Main Office Address: Gregory S. Viniard
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142

Fax: (217) 529-2174

Email:

Language(s): English

Licenses: IL LCPC #180-003061, Clinically Certified
Forensic Counselor #F18393, Clinically
Certified DV Counselor #F18394

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Clark

Human Resources Center of Edgar & Clark Counties

Name & Main Office Address: Rita C. Hay
118 E. Court Street
Paris, IL 61944

Phone: (217) 465-4118
Fax: (217) 826-3682
Email: rita.hay@hrcec.org
Language(s): English
Licenses:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Rod Neeson
118 E. Court Street
Paris, IL 61944

Phone: (217) 465-4118
Fax: (217) 463-1899
Email: rod.neeson@HRCEC.org
Language(s): English
Licenses: IL LCPC #180-000647, National Board
Certified Counselor, Masters Addiction
Counselor

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Kimberly B. Smith
118 E. Court Street
Paris, IL 61944

Phone:
Fax:
Email: kim.smith@hrcec.org
Language(s): English
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Clay

Brown Counseling & Consulting

Name & Main Office Address: Jeffrey R. Brown
2622 Washington Avenue
Vincennes, IN 47591

Phone: (812) 887-5431
Fax: (812) 886-3010
Email: lazlo81@charter.net
Language(s): English
Licenses: ACSW; LCSW, IL #148-008300 & IN
#34001119A; CADC III; ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Effingham County Probation Office

Name & Main Office Address: Sandy Taylor, MS, LCPC
106 N. Third Street
Effingham, IL 62401-3456

Phone: (217) 347-7931
Fax: (217) 347-2001
Email: sandy_taylor9@yahoo.com
Language(s): English
Licenses: IL LCPC #180-005527

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Gary Lemmon and Associates, Inc.

Name & Main Office Address: Gary L. Lemmon
904 E. Main
Norris City, IL 62869

Phone: (618) 378-3010
Fax: (618) 378-2308
Email: glemmon@shawneelink.net
Language(s): English
Licenses: IL LCSW-#149-00164, Clinical Member ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Clinton

Alternatives Counseling, Inc.

Name & Main Office Address: Donya Adkerson, MA
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085
Fax: (618) 288-8959
Email: donya2@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC-180-000271

Name & Main Office Address: Bethany A. Munge, M.A., Q.M.H.P.
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085 x202
Fax: (618) 288-8959
Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Community Resource Center

Name & Main Office Address: Thomas Sims
101 S. Locust Street
Centralia, IL 62801

Phone: (618) 533-1391
Fax: (618) 533-0012
Email: simstwo@yahoo.com

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LPC 178-003866

Name & Main Office Address: Dale H. Spitler
101 S. Locust Street
Centralia, IL 62801

Phone: (618) 533-1391
Fax: (618) 533-0012
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW #149-003298, Academy of Certified Social Workers

Darlene M. Bushue, M.A., LCPC

Name & Main Office Address: #Error

Phone: (618) 444-7736
Fax:
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC 180-004485

Effingham County Probation Office

Name & Main Office Address: Sandy Taylor, MS, LCPC
106 N. Third Street
Effingham, IL 62401-3456

Phone: (217) 347-7931
Fax: (217) 347-2001
Email: sandy_taylor9@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC #180-005527



Sex Offender Management Board Approved Provider List - By County



Clinton

Linda Stover and Associates

Name & Main Office Address: Linda Stover, M.S.Ed, LCPC, CCJS, CSOTS
417 E. Calumet
Centralia, IL 62801

Phone: (618) 322-2811

Fax: (618) 532-6805

Email: lstover@netwitz.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, Certified Criminal Justice Specialist,
ATSA Member, Certified Sex Offender
Treatment Specialist

Provident Counseling

Name & Main Office Address: Caroline M. Foss
2650 Olive Street
St. Louis, MO 63103

Phone: (314) 371-6500 x1127

Fax: (314) 371-6508

Email: cfoss@providentc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Name & Main Office Address: James M. Moll
2650 Olive Street
St. Louis, MO 63103

Phone: (314) 802-2598

Fax: (314) 371-6508

Email: jm@providentc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Name & Main Office Address: Margaret A. Schicker
2650 Olive Street
St. Louis, MO 63103

Phone: (314) 371-6500

Fax: (314) 371-6508

Email: margaret.schicker@providentc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: LCSW

Psychology Associates

Name & Main Office Address: W. David McEchron
4455 E. 56th Street
Davenport, IA 52807

Phone: (563) 355-2577

Fax: (563) 355-4015

Email: mcechronw@genesishhealth.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English, Spanish

Licenses: IL LCP-#071-006817; CPQ #144

Stanislaus, MD, Angeline

Name & Main Office Address: Angeline Stanislaus, M.D.
621 S. New Ballas Road, Suite 268A
St. Louis, MO 63141

Phone: (618) 791-1777

Fax:

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Medical License #036-102686 ; Certification
in Forensic Psychiatry



Sex Offender Management Board Approved Provider List - By County



Coles

Coles County Mental Health Center

Name & Main Office Address: Howard Levine, Ph.D., LCP
1300 Charleston Ave., P.O. Box 1307
Mattoon, IL 61938

Phone: (217) 234-6405

Fax: (217) 258-6136

Email: hlevine@ccmhmc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-004262

Debbie Cunningham

Name & Main Office Address: Debbie Cunningham
14031 E. Co. Rd 150N
Lerna, IL 62440

Phone: (217) 343-6314

Fax:

Email: baggsly@consolidated.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW

Human Resources Center of Edgar & Clark Counties

Name & Main Office Address: Rita C. Hay
118 E. Court Street
Paris, IL 61944

Phone: (217) 465-4118

Fax: (217) 826-3682

Email: rita.hay@hrcec.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses:

Name & Main Office Address: Rod Neeson
118 E. Court Street
Paris, IL 61944

Phone: (217) 465-4118

Fax: (217) 463-1899

Email: rod.neeson@HRCEC.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-000647, National Board
Certified Counselor, Masters Addiction
Counselor

Name & Main Office Address: Kimberly B. Smith
118 E. Court Street
Paris, IL 61944

Phone:

Fax:

Email: kim.smith@hrcec.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW

Kling, Joanna M.Ed., LCPC

Name & Main Office Address: Joanna Kling, M.Ed., LCPC
507 W. Springfield Avenue
Urbana, IL 61801

Phone: (217) 344-4722

Fax: (217) 344-4733

Email: jokling611@insightbb.com

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, NBCC



Sex Offender Management Board Approved Provider List - By County



Cook

Abdul Basit, Ph.D.

Name & Main Office Address: Abdul Basit, Ph.D.
3612 W. Lincoln Highway, Suite 17
Olympia Fields, IL 60461

Phone: (708) 767-3452
Fax: (708) 720-0130
Email: abasit97@aol.com
Language(s): Arabic , English , Hindi , Urdu
Licenses: IL LCP #071-005712

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Adelante, P.C.

Name & Main Office Address: Eileen Arzani
1608 N. Milwaukee, Suite 407
Chicago, IL 60647

Phone: (773) 486-0031
Fax: (773) 486-1891
Email:
Language(s): English , Spanish
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Evaristo Ruiz
1608 N. Milwaukee, Suite 407
Chicago, IL 60647

Phone: (773) 486-0031
Fax: (773) 486-1891
Email:
Language(s): English , Italian , Spanish
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Karen Stanbary
1608 N. Milwaukee, Suite 407
Chicago, IL 60647

Phone: (773) 486-0031
Fax: (773) 486-1891
Email:
Language(s): English , Spanish
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Adler School of Professional Psychology

Name & Main Office Address: Robert T. Baker III, PsyD
65 W. Wacker Place, Suite 2200
Chicago, IL 60601

Phone: (312) 201-5900
Fax: (312) 201-5917
Email: rtb@adler.edu
Language(s): English
Licenses: IL LCP #071-006239

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Affiliated Psychologists, LTD

Name & Main Office Address: Patrick Hoatlin, LCSW
4801 W. Peterson Avenue, Suite 525
Chicago, IL 60646

Phone: (773) 286-3100
Fax: (773) 777-7543
Email:
Language(s): English
Licenses: IL LCSW #149-011120

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Cook

Affiliated Psychologists, LTD

Name & Main Office Address:	Barry M. Leavitt, Psy.D. 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (773) 286-3100 Fax: (773) 777-7543 Email: ckopeny@ap-ltd.com
Services Provided:		Language(s): English Licenses: IL LCP, Hare Psychopathy Checklist (PCL-R) Certification
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Ray Quackenbush 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (773) 286-3100 Fax: (773) 777-7543 Email: quaq@earthlink.net
Services Provided:		Language(s): English Licenses: IL Psychology License #091-006293, Clinical Member ATSA
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Phil Reidda, Ph.D. 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (773) 286-3100 Fax: (773) 777-7543 Email: ckopeny@ap-ltd.com
Services Provided:		Language(s): English Licenses: IL LCP, Hare Psychopathy Checklist (PCL-R) Certification, Diplomat American Board Professional Psychologists
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Laura T. Schultz, Psy.D. 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (773) 286-3100 Fax: (773) 777-7543 Email:
Services Provided:		Language(s): English Licenses: IL LCP
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Pamela C. Van Wyk 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (765) 721-7863 Fax: (773) 777-7543 Email: pcvw811@illicom.net
Services Provided:		Language(s): English Licenses: IL-LCPC, IN-LMHC, AL-LMFT, ATSA Clinical Member
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	No	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	No	All applicant attestation qualifications? Yes

Allied Counseling

Name & Main Office Address:	Gerard J. Girdaukas, Ph.D. 49 Sherwood Terrace Lake Bluff, IL 60044	Phone: (847) 615-1425 Fax: (847) 615-1409 Email:
Services Provided:		Language(s): English Licenses: IL LCP, Ph.D.
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	No	All treatment provider qualifications? No
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:	Michael Albert 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: malbert@abtc-centers
Services Provided:		Language(s): English Licenses: IL LPC
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes



Sex Offender Management Board Approved Provider List - By County



Cook

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Jenny Anderson 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 587-7905 Fax: (847) 487-9360 Email: janderson@abtc-centers.org Language(s): English Licenses: IL LSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Jenifer Brickman 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: jbrickman@abtc-centers.org Language(s): English Licenses: IL LCSW-149-010065
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Arturo Gudino, Jr. 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 x226 Fax: (708) 386-8145 Email: agudino@abtc-centers.org Language(s): English , Spanish Licenses: IL LCPC#180-004330
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Michael Igaravidez, Psy.D. 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 386-8145 Email: migaravidez@abtc-centers.org Language(s): English Licenses: IL LCP #071-006172
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Theresa Jackson 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 848-6176 Email: tjackson@abtc-centers.org Language(s): English Licenses: IL LSW-#150-006805
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Dawn Livorsi 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: dlivorsi@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Deborah May 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: dmay@abtc-centers.org Language(s): English Licenses: IL LCSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



Cook

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Robin McGinnis, MSW 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: rmcginnis@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Becky Palmer 715 Lake Street Oak Park, IL 60301	Phone: (708) 386-8145 x23 Fax: (708) 848-6176 Email: bpalmer802@aol.com Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Melissa Pannell 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x145 Fax: (847) 487-9360 Email: mpannell@abtc-centers.org Language(s): English Licenses: IL LPC, ABEL Certified
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Lauren Parks 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x146 Fax: (847) 487-9360 Email: lparks@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Kevin J. Robson 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x165 Fax: (847) 487-9037 Email: krobson@abtc-centers.org Language(s): English Licenses: First Aid, CPR Part I, Surrogate PatientTrainer
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Eva San Pedro 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 386-8145 Email: esanpedro@abtc-centers.org Language(s): English , Spanish Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Carolyn Seaman 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x135 Fax: (847) 487-9360 Email: cseaman@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



Cook

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Natalie Seel 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: nseel@abtc-centers.org Language(s): English Licenses: LSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Edgar F. Sherk 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: esherk@abtc-centers.org Language(s): English Licenses: IL LCSW #149-002963
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Susan Urban 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9037 Email: surban@abtc-centers.org Language(s): English Licenses: IL LCSW #149-011169
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Keef Weinstein 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: kweinstein@abtc-centers.org Language(s): English Licenses: IL LPC
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Karen Wolownik, MSW 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: kwolownik@abtc-centers.org Language(s): English Licenses: IL-LCSW #149-010954, CSW (Michigan), Certified Adolescent Sexual Offender Prof.
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		

Blain and Associates, P.C.

Name & Main Office Address:		Daun Blain 135 N. Greenleaf, Suite 204 Gurnee, IL 60031	Phone: (847) 625-0980 x2 Fax: (847) 223-0887 Email: daun_blain@yahoo.com Language(s): English Licenses: IL-LCPC-#180-000167
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Gerald Blain P.O. Box 855 Grayslake, IL 60085	Phone: (847) 791-5928 Fax: (847) 223-0887 Email: jerry2@core.com Language(s): English Licenses: IL LCPC-#180-002267, LSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



Cook

Blain and Associates, P.C.

Name & Main Office Address: Adam Krieger
P.O. Box 855
Grayslake, IL 60085

Phone: (847) 791-5928
Fax: (847) 223-0887

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Email:
Language(s): English
Licenses: IL LCSW

Catholic Charities

Name & Main Office Address: Sandra E. Jamison
651 W. Lake Street
Chicago, IL 60606

Phone: (312) 808-1080
Fax: (312) 808-6176

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Email: jayds6049@sbcglobal.net
Language(s): English
Licenses: IL LCSW #149-004566

Center for Contextual Change

Name & Main Office Address: Don R.J. Castaldi, Psy.D.
125 N. Marion Street, Suite 201
Oak Park, IL 60301

Phone: (708) 524-1301 x2
Fax: (708) 524-1401

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Email: donc@centerforcontextualchange.org
Language(s): English
Licenses: Advanced Training in Abel Screen

Name & Main Office Address: Don R.J. Castaldi, Psy.D.
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (708) 524-1301 x2
Fax: (708) 524-1401

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Email: donc@centerforcontextualchange.org
Language(s): English
Licenses: Advanced Training in Abel Screen

Name & Main Office Address: Joseph J. Cortese
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (847) 676-4447 x312
Fax: (847) 676-4450

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Email: cortese1@comcast.net
Language(s): English
Licenses: IL LCSW #149-000645

Name & Main Office Address: Peg Duros
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (847) 676-4447 x221
Fax: (847) 676-4450

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Email: pegd@centerforcontextualchange.org
Language(s): English
Licenses: IL LCSW #149-002016

Name & Main Office Address: Joel A. Falco, MA, LCSW
125 N. Marion Street, Suite 201
Oak Park, IL 60301

Phone: (847) 674-4447 x300
Fax: (847) 676-4450

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Email: hopecat@hotmail.com
Language(s): English
Licenses: IL LCSW, Clinical Member of ATSA



Sex Offender Management Board Approved Provider List - By County



Cook

Center for Contextual Change

Name & Main Office Address: Joel A. Falco, MA, LCSW
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (847) 674-4447 x300

Fax: (847) 676-4450

Email: hopecat@hotmail.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW, Clinical Member of ATSA

Name & Main Office Address: Michael "Mike" Just
125 N. Marion Street, Suite 201
Oak Park, IL 60301

Phone: (847) 676-4447 x301

Fax: (847) 676-4450

Email: justmikejust@sbcglobal.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-006042; Attorney

Name & Main Office Address: Michael "Mike" Just
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (847) 676-4447 x301

Fax: (847) 676-4450

Email: justmikejust@sbcglobal.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-006042; Attorney

Name & Main Office Address: Kelli Underwood
125 N. Marion Street, Suite 201
Oak Park, IL 60301

Phone: (847) 676-4447 x223

Fax: (847) 676-4450

Email: kelliunderwoodccc@hotmail.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW

Chicago Christian Counseling Center

Name & Main Office Address: Anne Krick
15127 S. 73rd Avenue, Suite G
Orland Park, IL 60462

Phone: (708) 845-5500 x106

Fax: (708) 845-5504

Email: akrick@chicagochristioncounseling.org

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-005562

Chuck Lederman, LCSW

Name & Main Office Address: Chuck Lederman, LCSW
68 Main Street, P. O. Box 95
Oswego, IL 60543

Phone: (630) 269-3146

Fax: (630) 551-0988

Email: chuck60543@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW



Sex Offender Management Board Approved Provider List - By County



Cook

Cognitive Behavioral Solutions

Name & Main Office Address: Christopher Fry
7355 W. Madison, Suite A
Forest Park, IL 60130

Phone: (708) 488-8120
Fax: (708) 488-1992
Email: cfrycbs@aol.com
Language(s): English
Licenses: IL LCPC 180-004518

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Tina L. Menier
7355 W. Madison, Suite A
Forest Park, IL 60130

Phone: (708) 488-8120
Fax: (708) 488-1992
Email: tmenier@sbcglobal.net
Language(s): English
Licenses: IL LCPC; NCC

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Community Youth Network, Inc.

Name & Main Office Address: Jeffery Miller
18640 W. Belvidere Road
Grayslake, IL 60030

Phone: (847) 548-6000
Fax: (847) 548-6040
Email:
Language(s): English
Licenses: IL LCPC; CADC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Randall W. Smith
18640 W. Belvidere Road
Grayslake, IL 60030

Phone: (847) 548-6000 x38
Fax: (847) 548-6040
Email: randall.w.smith@us.army.mil
Language(s): English
Licenses: IL LPC; CADC; CSAP; EMDR 1 & 2

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Jody Springer
18640 W. Belvidere Road
Grayslake, IL 60030

Phone: (847) 949-7275
Fax: (847) 548-6040
Email:
Language(s): English
Licenses: IL LCSW, LSW, Licensed direct child welfare services provider, CERAP certified

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Scott E. Stolarick
18640 W. Belvidere Road
Grayslake, IL 60030

Phone: (847) 548-6000 x20
Fax: (847) 548-6040
Email: sstolarick@aol.com
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Cook County Juvenile Court - Probation

Name & Main Office Address: Irvin Ashford
1100 S. Hamilton, 2nd floor
Chicago, IL 60612

Phone: (312) 433-6512
Fax: (312) 433-7935
Email: ilashfo@cookcountygov.com
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Cook

Cook County Juvenile Court - Probation

Name & Main Office Address:		Martin A. Gleason 1100 S. Hamilton, 2nd floor Chicago, IL 60612	Phone: (312) 433-5511 Fax: (312) 433-7935 Email: ccjso@comcast.net Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Enrico Granata 1100 S. Hamilton, 2nd floor Chicago, IL 60612	Phone: (312) 433-4620 Fax: (312) 433-7935 Email: ricogranata@yahoo.com Language(s): English Licenses: SACY Certification
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Amanda Halawa-Mahdi 1100 S. Hamilton, 2nd floor Chicago, IL 60612	Phone: (312) 433-4460 Fax: (312) 433-7935 Email: anhalaw@cookcountygov.com Language(s): Arabic , English Licenses: IL LCSW #149-010179
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Arsolanda Lamothe-Waters 1100 S. Hamilton, 2nd floor Chicago, IL 60612	Phone: (312) 433-4458 Fax: (312) 433-7935 Email: Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Miguel Lewis 1100 S. Hamilton, 2nd floor Chicago, IL 60612	Phone: (312) 433-6967 Fax: (312) 433-7935 Email: malewis@cookcountygov.com Language(s): English Licenses: IL LCPC
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Jose O. Oporto 1100 S. Hamilton, 2nd floor Chicago, IL 60612	Phone: (312) 433-4462 Fax: (312) 433-7935 Email: joportocookcountygov.com Language(s): English , Spanish Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Tom Schneider 1100 S. Hamilton, 2nd floor Chicago, IL 60612	Phone: (847) 470-7528 Fax: (847) 470-5166 Email: Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



Cook

Cook County Juvenile Court - Probation

Name & Main Office Address: Christina Vitale
1100 S. Hamilton, 2nd floor
Chicago, IL 60612

Phone: (312) 433-7929
Fax: (312) 433-7935
Email: cvittyrun@yahoo.com
Language(s): English
Licenses: IL LCSW #149-009183

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Cornerstone Clinical Associates, Ltd.

Name & Main Office Address: Warren B. Matson
300 S. County Farm Road, #E
Wheaton, IL 60187

Phone: (630) 871-0770
Fax: (630) 871-0772
Email: wmatson@email.com
Language(s): English
Licenses: LCPC, ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Diane Lytton, Ph.D.

Name & Main Office Address: Diane Lytton, Ph.D.
6666 Odana Road, #503
Madison, IL 53719

Phone: (608) 226-0377
Fax:
Email:
Language(s): English
Licenses: WI-#1790; Fellow, WI Sex Offender Tx Network

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

E. F. Ghoughan and Associates, Inc.

Name & Main Office Address: Lisa Wilson, LCPC, MISA I, CADP
10 W. 35th Street, #11C3-2
Chicago, IL 60616

Phone: (312) 567-1410
Fax: (312) 567-1449
Email: eghoughan@aol.com
Language(s): English
Licenses: IL LCPC, IAODACA-MISA I, CADP, Management of Sex Offenders & Violent Perpetrators Certification

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Establishing, Managing & Generating Effective Services, Inc. (Ema)

Name & Main Office Address: Hattie Wash
110 E. 79th Street
Chicago, IL 60619

Phone: (773) 224-7386
Fax: (773) 224-7685
Email:
Language(s): English
Licenses: IL LCPC, ATSA, CSAC, MAC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Forensic Psych Associates, Ltd.

Name & Main Office Address: Robert H. Gordon, Ph.D.
203 N. LaSalle Street, #2100
Chicago, IL 60601

Phone: (312) 917-1610
Fax: (608) 756-5174
Email: rgordon@forensicpsych.com
Language(s): English
Licenses: IL LCP

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Cook

Forensic Psychology Associates

Name & Main Office Address: Mark Brenzinger, PsyD
445 E. Ohio, Suite 450
Chicago, IL 60611

Phone: (312) 740-9691
Fax: (312) 527-9088
Email: ciba9@worldnet.att.net
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Eric Ostrov, J.D., Ph.D., ABPP
445 E. Ohio, Suite 450
Chicago, IL 60611

Phone: (312) 740-9691
Fax: (312) 527-9088
Email: eostrov@aol.com
Language(s): English
Licenses: IL Psy.D. 071-001951, IL Attorney #3128938

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Susan Page, Psy.D.
445 E. Ohio, Suite 450
Chicago, IL 60611

Phone: (312) 399-3140
Fax: (312) 527-9088
Email: slpage27@aol.com
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Haymarket Center (McDermott Center)

Name & Main Office Address: Sherry S. Kostman, Psy.D., CADC, CCJAS, CFAE
120 N. Sangamon
Chicago, IL 60607

Phone: (312) 226-7984 x409
Fax: (312) 226-7964
Email: skostman@hcenter.org
Language(s): English
Licenses: IL LPC #178-002577, CADC #24934, CCJAS #24552, CFAE, ATSA Clinical Member

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Heaton, Psy.D., Paul J.

Name & Main Office Address: Paul J. Heaton, Psy.D.
3000 Dundee Road, Suite 411
Northbrook, IL 60025

Phone: (847) 857-1000
Fax: (847) 729-6208
Email: il-atsa@aol.com
Language(s): English
Licenses: IL LCP 071-003498 & IN LCP

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Henry W. Lahmayer, M.D.

Name & Main Office Address: Henry W. Lahmeyer, MD
Two Northfield Plaza, Suite 100
Northfield, IL 60093

Phone: (847) 446-3531
Fax: (847) 446-3573
Email:
Language(s): English
Licenses: American Board (AB) of Psychiatry & Neurology, AB of Sleep Medicine, Clinical Polysomnography, Forensic Psychiatry

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Cook

Human Effective Living Programs, Inc. (HELP, Inc.)

Name & Main Office Address:		Arnold Black 417 S. Dearborn Chicago, IL 60605	Phone: (312) 939-6633 Fax: (312) 939-2444 Email: ablack@ccchicago.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Gabriella Cohen, MA 417 S. Dearborn Chicago, IL 60605	Phone: (312) 939-6633 Fax: (312) 939-2444 Email: Language(s): English , French , Italian Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Alban Fisher, Ph.D., LCPC 417 S. Dearborn Chicago, IL 60605	Phone: (312) 939-6633 Fax: (312) 939-2444 Email: Language(s): English Licenses: IL LCPC, DCFS- Child Welfare, CERAP, Wraparound Trainer, CANS Trainer
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Gail P. Sullivan, M.A. 417 S. Dearborn Chicago, IL 60605	Phone: (312) 939-6633 Fax: (312) 939-2444 Email: gpsullvn@aol.com Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		

IDHS Treatment & Detention Facility

Name & Main Office Address:		Michael P. Bednarz, MD 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 x232 Fax: (815) 740-8817 Email: dhs41an@dhs.state.il.us Language(s): English Licenses: Licensed Physician & Surgeon; Controlled License (substance); DEA License; Brd cert internal medicine & psychiatrist
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Mark Brenzinger, PsyD 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: ciba9@worldnet.att.net Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Robert Brucker, Jr. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: dhs4140@dhs.state Language(s): English Licenses: IL LCP-071-006097
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		



Sex Offender Management Board Approved Provider List - By County



Cook

IDHS Treatment & Detention Facility

Name & Main Office Address:		Lea B. Chankin, Psy.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: dhs4120@dhs.state.il.us Language(s): English Licenses: IL LCP-071-006553
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Jeffrey C. Clausen 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: jclausen@mc.net Language(s): English Licenses: IL LCPC 180-005378
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Detrahl Dearbone-Collins 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: dearbon@cs.com Language(s): English Licenses: IL LCPC, CADAC, CCJS
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		William DuBois 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 x251 Fax: (815) 740-8817 Email: Language(s): English Licenses: IL LPC #178-004016
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Catherine A. Furtado, Psy.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: dhs41cp@dhs.state.il.us Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Steve Gaskell 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 x246 Fax: (815) 207-1538 Email: drsdg71@gmail.com Language(s): English Licenses: IL LCP #71006877; GA #002566
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	No
Treatment ?	No	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Guy Groot 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: g.groot@mchsi.com Language(s): English Licenses: IL LCPC, CADAC, MISA II
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		



Sex Offender Management Board Approved Provider List - By County



Cook

IDHS Treatment & Detention Facility

Name & Main Office Address:		Shan Jumper 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 x221 Fax: (815) 740-8817 Email: dhs4115@dhs.state.il.us Language(s): English Licenses: IL LCP 071-006021
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Carey Lavaux 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8810 Email: dhs4141@dhs.state.il.us Language(s): English Licenses: IL LPC-#178-001064
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Chad Lewing 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: chadlewing@comcast.net Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Kimberly S. Litton, Psy.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: dhs41bb@dhs.state.il.us Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Scott W. Maieritsch, Ph.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: dhs4139@dhs.state.il.us Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Rhoda Meacham 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 x266 Fax: (815) 740-8817 Email: Language(s): English Licenses: LCSW #149-011604
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Shane M. Reister, Psy.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8780 Email: shanemreister@hotmail.com Language(s): English Licenses: IL LCP#071-007001
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		



Sex Offender Management Board Approved Provider List - By County



Cook

IDHS Treatment & Detention Facility

Name & Main Office Address:		Janet Sand 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: dhs41A6@dhs.state.il.us Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Craig Schiesser, Psy.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: Language(s): English Licenses: IL LCP-#071-005597
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Karen Smith 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: karenspc@yahoo.com Language(s): English Licenses: IL LCPC
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Thomas J. Speaker, Ph.D., LCPC 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: tspeaker@sbcglobal.net Language(s): English Licenses: IL LCPC #180-003801, CADC III, WI LCSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Natasha Stumpf 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: Language(s): English Licenses: IL LPC-#178-002746, NCC
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Sylvia Sun 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: psysun@yahoo.com Language(s): English , Mandarin Licenses: IL LCP #071-005619
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Phyllis Tolley 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: Language(s): Cantonese , English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



Cook

IDHS Treatment & Detention Facility

Name & Main Office Address: Richard D. "Bo" Travis, MA, LCPC
401 Woodruff Road
Joliet, IL 60432

Phone: (815) 723-2844
Fax: (815) 740-8817
Email: botravis@earthlink.net
Language(s): English
Licenses: IL LCPC-#180-003461

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Brent Ulrich
401 Woodruff Road
Joliet, IL 60432

Phone: (815) 740-8781 x251
Fax: (815) 740-8817
Email: blurich623@juno.com
Language(s): English
Licenses: LPC #178-004133

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Raymond Wood, Ph.D.
401 Woodruff Road
Joliet, IL 60432

Phone: (815) 740-8781 x220
Fax: (815) 740-8817
Email: dhs4108@dhs.state.il.us
Language(s): English
Licenses: IL LCP-#071-005813

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Illinois Department of Corrections (Special Needs Unit)

Name & Main Office Address: Michael Gold, MA, LSW
3508 W. Grand Avenue
Chicago, IL 60651

Phone: (773) 292-2867
Fax: (773) 292-3442
Email: mgold@idoc.state.il.us
Language(s): English , Romanian
Licenses: IL LSW #150-010181

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Indian Oaks Academy

Name & Main Office Address: Daphne Bogenscheider
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700
Fax: (815) 468-2310
Email:
Language(s): English
Licenses: LCPC, EMDR Level I, CANS, CERAP

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Michael Chavers
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3738
Fax: (815) 468-2310
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Thomas Duff
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700
Fax: (815) 468-2310
Email: dufft@nexus-ioa.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Cook

Indian Oaks Academy

Name & Main Office Address: Andrew Fisher
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700
Fax: (815) 468-2310
Email: fishera@nexus-ioa.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC

Name & Main Office Address: Sara E. Langevin, MA
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700
Fax: (815) 468-2310
Email: langevins@nexus-ioa.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses:

Name & Main Office Address: Amber Residori, LCSW
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700
Fax: (815) 468-2310
Email: residori@nexus-ioa.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English , French
Licenses: IL LCSW

Name & Main Office Address: William K. Robison
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3713
Fax: (815) 468-2310
Email: robisonw@Nexus-IOA.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL Clinical Psychology #071-006191; IL MFT 166-000144

Kevin & Associates

Name & Main Office Address: Maureen Kevin, LCSW
110 Cottage Hill, Suite 305
Elmhurst, IL 60126

Phone: (630) 941-8270
Fax: (630) 941-8294
Email: mureenkevin@hotmail.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW #149-000550

Kids Hope United

Name & Main Office Address: Gaby Adisho
1712 S. Prairie
Chicago, IL 60616

Phone: (312) 949-5822
Fax: (312) 663-1199
Email: gadisho@kidshopeunited.org

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): Arabic , English
Licenses: None

Name & Main Office Address: Charles L. Alexander
1712 S. Prairie
Chicago, IL 60616

Phone: (312) 949-5805
Fax: (312) 663-1199
Email: calexander@kidshopeunited.org

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP #071-006493



Sex Offender Management Board Approved Provider List - By County



Cook

Kids Hope United

Name & Main Office Address:	Kristan Cameron 215 N. Milwaukee Avenue Lake Villa, IL 60046	Phone: (847) 245-6570 Fax: (847) 245-6714 Email: kcameron@kidshopeunited.org Language(s): English Licenses: IL LCPC 180-002580
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? Yes
Adult ?	No	All applicant attestation qualifications? Yes
Juvenile ?	Yes	
Name & Main Office Address:	Shenandoah Cardwell 215 N. Milwaukee Avenue Lake Villa, IL 60046	Phone: (847) 245-6544 Fax: (847) 245-6714 Email: scardwell.LCPC@comcast.net Language(s): English Licenses: IL LCPC #180-001256, WI LPC #2906-125, NCC #22818
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? Yes
Adult ?	Yes	All applicant attestation qualifications? Yes
Juvenile ?	Yes	
Name & Main Office Address:	Denny Clouse, MSW, LCSW 1750 E. Main Street, Suite 40 St. Charles, IL 60174	Phone: (847) 741-7140 Fax: (847) 741-2089 Email: dclouse@kidshopeunited.org Language(s): English Licenses: IL LCSW #149-005893, Clinical ATSA
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? Yes
Adult ?	Yes	All applicant attestation qualifications? Yes
Juvenile ?	Yes	
Name & Main Office Address:	Donyetta Jones 1712 S. Prairie Chicago, IL 60616	Phone: Fax: (312) 663-1199 Email: djones@kidshopeunited.org Language(s): English Licenses: None
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? No
Adult ?	No	All applicant attestation qualifications? Yes
Juvenile ?	Yes	
Name & Main Office Address:	Dennis Kyrouac 1750 E. Main Street, Suite 40 St. Charles, IL 60174	Phone: (847) 741-7140 Fax: (847) 741-2089 Email: dkyrouac@msn.com Language(s): English Licenses: IAODAPCA Counselor, CADC
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? No
Adult ?	Yes	All applicant attestation qualifications? Yes
Juvenile ?	Yes	
Name & Main Office Address:	Michael G. Selders 1712 S. Prairie Chicago, IL 60616	Phone: (312) 949-5806 Fax: (312) 663-1199 Email: mselders@kidshopeunited.org Language(s): English Licenses: None
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? No
Adult ?	No	All applicant attestation qualifications? Yes
Juvenile ?	Yes	
Name & Main Office Address:	Liza Simon-Roper 215 N. Milwaukee Avenue Lake Villa, IL 60046	Phone: (847) 245-6547 Fax: (847) 245-6714 Email: lsroper@kidshopeunited.org Language(s): English Licenses: IL LCSW, WI LCSW, ATSA Member
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? Yes
Adult ?	Yes	All applicant attestation qualifications? Yes
Juvenile ?	Yes	



Sex Offender Management Board Approved Provider List - By County



Cook

Latino Family Services, P.C.

Name & Main Office Address: Arturo Hurtado, LCSW, ACSW
825 E. Golf Road, Suite 1133
Arlington Heights, IL 60005-5200

Phone: (847) 593-7077

Fax: (847) 593-7056

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English , Spanish

Licenses: IL LCSW-#149-005124, ACSW, ATSA Clinical Member

Mack E. Winn and Associates

Name & Main Office Address: Mack E. Winn, LCSW
11 N. Skokie Highway, Suite 111
Lake Bluff, IL 60044

Phone: (847) 604-9451

Fax: (847) 604-9457

Email: mwatx111@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-003400, Clinical Member ATSA (1994-Present)

Marcy Pritzen, LCSW

Name & Main Office Address: Marcy Pritzen, LCSW
3295 N. Arlington Heights Rd, Suite 103
Arlington Heights, IL 60004

Phone: (847) 636-6364

Fax: (847) 398-6595

Email: mpritzen@mindspring.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-005331

McKibbin, MS, LCPC, Alex E.

Name & Main Office Address: Alex E. McKibbin, MS, LCPC
24402 W. Lockport, Suite 2-B
Plainfield, IL 60544

Phone: (630) 456-2519

Fax: (815) 230-3652

Email: a.mckibbin@att.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-001736

Michael R. Davison

Name & Main Office Address: Michael R. Davison
3295 N. Arlington Heights Road, Suite 103
Arlington Heights, IL 60004

Phone: (847) 788-0645

Fax: (847) 398-6595

Email: apsychdoc@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071005-382

New Hope Community Service Center

Name & Main Office Address: Brenda Golden
2701 West 79th Street
Chicago, IL 60652

Phone: (773) 737-9555

Fax: (773) 737-0401

Email: brendanhcsc@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: CADAC #6158, Sex Abuse and Domestic Violence Certificate



Sex Offender Management Board Approved Provider List - By County



Cook

Nickerson and Associates

Name & Main Office Address: Jerry Lowell
P.O. Box 239 (also office in Chicago)
Winfield, IL 60190

Phone: (630) 707-7380
Fax: (630) 839-5068
Email: jlowellLCSW@msn.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW #149-003408

Name & Main Office Address: Debra Nickerson, Psy.D.
P.O. Box 239 (also office in Chicago)
Winfield, IL 60190

Phone: (630) 752-9725
Fax: (630) 752-9726
Email: tnick@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP # 071-006020

Northwest Treatment Associates

Name & Main Office Address: Carol Fetzner
645 McHenry Avenue
Woodstock, IL 60098

Phone: (815) 337-1234
Fax: (815) 337-5653
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC #180-000371, NCC 27767

Name & Main Office Address: Patrick C. Littlejohn, MA, NCC, LCPC
645 McHenry Avenue
Woodstock, IL 60098

Phone: (815) 337-1234
Fax: (847) 608-8570
Email: pclittlejohn@hotmail.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC, National Certified Counselor, Clinical Member-ATSA

Name & Main Office Address: Bonnie E. Marable
645 McHenry Avenue
Woodstock, IL 60098

Phone: (815) 337-1234
Fax: (847) 608-8572
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP #071-006480; IN Psychologist

Name & Main Office Address: Cheryl R. Runion
1185 Dundee Avenue, E-1
Elgin, IL 60120

Phone: (847) 608-8570
Fax: (847) 608-8576
Email: j.runion@comcast.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC, CADC, CCJP, NCC

Name & Main Office Address: Dr. Jim Webster, PsyD
1185 Dundee Avenue, E-1
Elgin, IL 60120

Phone: (815) 337-1234
Fax: (815) 337-5653
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None



Sex Offender Management Board Approved Provider List - By County



Cook

Oak Forest Psychological Service, P.C.

Name & Main Office Address: Mitchell Hicks, Ph.D., LCPC
6320 W. 159th Street, Suite E
Oak Forest, IL 60452

Phone: (708) 429-2777 x27

Fax:

Email: mwhicks@drmittelhicks.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-005185, IL LCP #071-006835,
Clinical Member of ATSA

Name & Main Office Address: Dr. Barbra Kraus
6320 W. 159th Street, Suite E
Oak Forest, IL 60452

Phone: (708) 429-2777

Fax: (708) 429-2780

Email: bkraus@oakforestpsych.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP-#071-006308

Psycynergy Psych Services

Name & Main Office Address: Dr. J. L. Weems
1131 E. 165th Street
South Holland, IL 60473

Phone: (773) 671-0466

Fax: (708) 333-3140

Email: dr_weems@hotmail.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, MISA II

Rainbow's End

Name & Main Office Address: Judith A. Gonzalez
4747 Lincoln Mall Drive - 420
Matteson, IL 60443

Phone: (708) 748-2000

Fax:

Email: jgonza@sbcglobal.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: Pending LCPC

RITAS Ministry

Name & Main Office Address: Judith "Jude" C. Skallerup
325 E. Galena
Aurora, IL 60505

Phone: (630) 966-0252

Fax: (630) 966-0005

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-004615, CSOTS

Robinson, LCSW, Shirley R.

Name & Main Office Address: Shirley R. Robinson
24829 S. Tryon Street
Channahon, IL 60410

Phone: (815) 467-5552

Fax:

Email: shirley.robinson@comcast.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: LCSW, BCD



Sex Offender Management Board Approved Provider List - By County



Cook

Ronald B. Baron, M.D.

Name & Main Office Address: Ronald B. Baron, M.D.
2120 Sheridan Road
Highland Park, IL 60035-2404

Phone: (847) 432-7007

Fax: (847) 432-7034

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: Certified Forensic Psychiatrist

Ronald Baker, M.D.

Name & Main Office Address: Ronald B. Baker, M.D.
2120 Sheridan Road
Highland Park, IL 60035

Phone: (847) 432-7007

Fax: (847) 432-7034

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Medical License # 036-039021, Certified in Psychiatry and Forensic Psychiatry from the American Board of Psychiatry and Neurology

Sherry S. Kostman, Psy.D., CADC, CCJAS, CFAE

Name & Main Office Address: Sherry S. Kostman, Psy.D., CADC, CCJAS, CFAE
445 East Ohio
Chicago, IL 60611

Phone: (312) 315-4411

Fax: (312) 527-5397

Email: skostman@hcenter.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LPC #178-002577, CADC #24934, CCJAS #24552, CFAE, ATSA Clinical Member

Simmons and Associates, Inc.

Name & Main Office Address: Ronald C. Simmons, Psy.D.
P.O. Box 772
Lemont, IL 60439

Phone: (630) 257-6690

Fax: (630) 257-6690

Email: rcsandassoc@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-000152

St. Joseph's Carondelet Child Center

Name & Main Office Address: Andrea K. Brown
739 E. 35th Street
Chicago, IL 60616

Phone: (773) 624-7443

Fax: (773) 624-7676

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-001460, LSW-150-001585

Name & Main Office Address: Desiree S. Crooke
739 E. 35th Street
Chicago, IL 60616

Phone: (773) 624-7443

Fax: (773) 624-7676

Email: dcrooke@stjccc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-010684



Sex Offender Management Board Approved Provider List - By County



Cook

St. Joseph's Carondelet Child Center

Name & Main Office Address: Sharon J. Grayson
739 E. 35th Street
Chicago, IL 60616

Phone: (773) 624-7443

Fax: (773) 624-7676

Email: sgrayson@st.jccc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW, Masters Level #149-008183

Name & Main Office Address: Gerald J. Gripshover
739 E. 35th Street
Chicago, IL 60616

Phone: (773) 624-7443

Fax: (773) 624-7676

Email: agripshover@stjccc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-001986

Name & Main Office Address: Thomas S. Keller
739 E. 35th Street
Chicago, IL 60616

Phone: (773) 624-7443

Fax: (773) 624-7676

Email: tkeller@stjccc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW

Name & Main Office Address: Amelia Koplow
6212 S. Sangamon
Chicago, IL 60621

Phone: (773) 476-7900

Fax: (773) 476-5882

Email: akoplow@stjccc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW

Name & Main Office Address: Amy Perlmeter, LSW
739 E. 35th Street
Chicago, IL 60616

Phone: (773) 624-7443

Fax: (773) 624-7676

Email: amyperlmeter@sbcglobal.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: LSW

Name & Main Office Address: Harriet E. Shaw, Ph.D.
739 E. 35th Street
Chicago, IL 60616

Phone: (773) 624-7443

Fax: (773) 624-7676

Email: hshaw@st.jccc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Clinical Psychology #071-005840

Name & Main Office Address: Marlo P. Simon
6212 S. Sangamon
Chicago, IL 60621

Phone: (773) 476-7900

Fax: (773) 476-5882

Email: msimon@stjccc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL-LSW #150-008899



Sex Offender Management Board Approved Provider List - By County



Cook

St. Joseph's Carondelet Child Center

Name & Main Office Address: Cynthia Waderlow
739 E. 35th Street
Chicago, IL 60616

Phone: (773) 624-7443
Fax: (773) 624-7676
Email: cwaderlow@stjccc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW

Suire, Ph.D., David M.

Name & Main Office Address: David M. Suire, Ph.D.
1012 W. Columbia, Bldg 28
Farmington, MO 63640

Phone: (573) 330-5402
Fax:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Email: davidsuire@yahoo.com
Language(s): English
Licenses: IL Psychologist 071-006216; MO Clinical Psychologist; TX Clinical Psychologist

Thomas and Blank

Name & Main Office Address: Sandi Blank
5301 N. Dempster, Suite 205
Skokie, IL 60077

Phone: (773) 412-5882
Fax:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Email: skklcsw@aol.com
Language(s): English
Licenses: IL LCSW

William "Kip" Hillman, Psy.D.

Name & Main Office Address: William "Kip" Hillman, Psy.D.
4064 N. Lincoln, #290
Chicago, IL 60618

Phone: (312) 933-0060
Fax: (773) 989-0275

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Email: kiphillman@yahoo.com
Language(s): English
Licenses: IL Psychology 071-003686

Crawford

Brown Counseling & Consulting

Name & Main Office Address: Jeffrey R. Brown
2622 Washington Avenue
Vincennes, IN 47591

Phone: (812) 887-5431
Fax: (812) 886-3010

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Email: lazlo81@charter.net
Language(s): English
Licenses: ACSW; LCSW, IL #148-008300 & IN #34001119A; CADC III; ATSA

Cumberland

Coles County Mental Health Center

Name & Main Office Address: Howard Levine, Ph.D., LCP
1300 Charleston Ave., P.O. Box 1307
Mattoon, IL 61938

Phone: (217) 234-6405
Fax: (217) 258-6136

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Email: hlevine@ccmhc.org
Language(s): English
Licenses: IL LCP #071-004262



Sex Offender Management Board Approved Provider List - By County



DeKalb

Braden Counseling Center

Name & Main Office Address: Danielle Calsyn
2580 DeKalb Avenue
Sycamore, IL 60178

Phone: (815) 787-9000
Fax: (815) 787-9015
Email: dcalsyn@frontiernet.net
Language(s): English
Licenses: CADC #21278

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Centegral HealthSystem/Horizons

Name & Main Office Address: Robert Meyer
527 W. South Street
Woodstock, IL 60098

Phone: (815) 338-9199
Fax: (815) 338-9205
Email: rmeyer3@charter.net
Language(s): English
Licenses: Ph.D., LCP, Fellow Academy of Forensic Psychologist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Community Counseling Center, Ltd.

Name & Main Office Address: Jeffrey A. Martin
666 Russell Court, Suite 105
Woodstock, IL 60098

Phone: (815) 338-7749
Fax: (815) 338-7728
Email: ccc@imaxx.net
Language(s): English
Licenses: IL LCSW 149-003373

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Family Services Agency of DeKalb County, Inc.

Name & Main Office Address: Kathleen M. Alberts, MSW, LCPC
14 Health Services Drive
DeKalb, IL 60115

Phone: (815) 758-8618
Fax: (815) 758-7569
Email:
Language(s): English
Licenses: IL LCPC #180-004462; Certified Sex Offender Tx Specialist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Family, Divorce & Mediation of Ogle County

Name & Main Office Address: Kathleen M. Alberts, MSW, LCPC
1500 West Lincoln Avenue
Rochelle, IL 61068

Phone: (815) 562-8818
Fax: (815) 562-8818
Email:
Language(s): English
Licenses: IL LCPC #180-004462; Certified Sex Offender Tx Specialist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Forensic Psych Associates, Ltd.

Name & Main Office Address: Robert H. Gordon, Ph.D.
203 N. LaSalle Street, #2100
Chicago, IL 60601

Phone: (312) 917-1610
Fax: (608) 756-5174
Email: rgordon@forensicpsych.com
Language(s): English
Licenses: IL LCP

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



DeKalb

Glenwood Testing Center

Name & Main Office Address: Frank E. Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-8133

Fax: (815) 968-4656

Email: fec@juno.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-002590

Name & Main Office Address: Kyle Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-5342

Fax: (815) 968-4656

Email: drcushing@juno.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, Consulting Forensic Examiner

Jeffrey B. Sundberg

Name & Main Office Address: Jeffrey B. Sundberg
P. O. Box 17044, 610 A East State Street
Rockford, IL 61110

Phone: (815) 332-8342

Fax: (815) 332-8342

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-003876, ACSW, ATSA Member

Kane County Diagnostic Center

Name & Main Office Address: Timothy Brown, Psy.D.
757 E. Fabyan Parkway
Batavia, IL 60510

Phone: (630) 262-4480

Fax: (630) 262-4484

Email: browntimothy@co.kane.il.us

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-003827

Name & Main Office Address: Lesley Kane, Psy.D.
757 E. Fabyan Parkway
Batavia, IL 60510

Phone: (630) 262-4480

Fax: (630) 262-4484

Email: kanelesley@co.kane.il.us

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP-#071-006757

Name & Main Office Address: Mark J. Kuzia, Psy.D.
757 E. Fabyan Parkway
Batavia, IL 60510

Phone: (630) 262-4480

Fax: (630) 262-4484

Email: mjkuzia@netzero.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Name & Main Office Address: Amanda Rosenkoetter
757 E. Fabyan Parkway
Batavia, IL 60510

Phone: (630) 262-4480

Fax: (630) 262-4484

Email: ajrosenkoetter@comcast.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP



Sex Offender Management Board Approved Provider List - By County



DeKalb

Kane County Diagnostic Center

Name & Main Office Address: Alexandra Tsang, Psy.D.
757 E. Fabyan Parkway
Batavia, IL 60510

Phone: (630) 444-1081
Fax: (630) 262-4484
Email: tsangalexandra@co.kane.il.us
Language(s): English , Polish
Licenses: IL LCP

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Kids Hope United

Name & Main Office Address: Kristan Cameron
215 N. Milwaukee Avenue
Lake Villa, IL 60046

Phone: (847) 245-6570
Fax: (847) 245-6714
Email: kcameron@kidshopeunited.org
Language(s): English
Licenses: IL LCPC 180-002580

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Shenandoah Cardwell
215 N. Milwaukee Avenue
Lake Villa, IL 60046

Phone: (847) 245-6544
Fax: (847) 245-6714
Email: scardwell.LCPC@comcast.net
Language(s): English
Licenses: IL LCPC #180-001256, WI LPC #2906-125, NCC #22818

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Denny Clouse, MSW, LCSW
1750 E. Main Street, Suite 40
St. Charles, IL 60174

Phone: (847) 741-7140
Fax: (847) 741-2089
Email: dclouse@kidshopeunited.org
Language(s): English
Licenses: IL LCSW #149-005893, Clinical ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Dennis Kyrouac
1750 E. Main Street, Suite 40
St. Charles, IL 60174

Phone: (847) 741-7140
Fax: (847) 741-2089
Email: dkyrouac@msn.com
Language(s): English
Licenses: IAODAPCA Counselor, CADAC

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Liza Simon-Roper
215 N. Milwaukee Avenue
Lake Villa, IL 60046

Phone: (847) 245-6547
Fax: (847) 245-6714
Email: lsroper@kidshopeunited.org
Language(s): English
Licenses: IL LCSW, WI LCSW, ATSA Member

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Nicholas F. O'Riordan, Ph.D.

Name & Main Office Address: #Error

Phone: (815) 241-4575
Fax:
Email: droriordan@sbcglobal.net
Language(s): English
Licenses: IL LCP #071-3652

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



DeKalb

Northwest Treatment Associates

Name & Main Office Address: Carol Fetzner
645 McHenry Avenue
Woodstock, IL 60098

Phone: (815) 337-1234

Fax: (815) 337-5653

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-000371, NCC 27767

Name & Main Office Address: Patrick C. Littlejohn, MA, NCC, LCPC
645 McHenry Avenue
Woodstock, IL 60098

Phone: (815) 337-1234

Fax: (847) 608-8570

Email: pclittlejohn@hotmail.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, National Certified Counselor, Clinical Member-ATSA

Name & Main Office Address: Bonnie E. Marable
645 McHenry Avenue
Woodstock, IL 60098

Phone: (815) 337-1234

Fax: (847) 608-8572

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-006480; IN Psychologist

Name & Main Office Address: Cheryl R. Runion
1185 Dundee Avenue, E-1
Elgin, IL 60120

Phone: (847) 608-8570

Fax: (847) 608-8576

Email: j.runion@comcast.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, CADC, CCJP, NCC

Name & Main Office Address: Dr. Jim Webster, PsyD
1185 Dundee Avenue, E-1
Elgin, IL 60120

Phone: (815) 337-1234

Fax: (815) 337-5653

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

RITAS Ministry

Name & Main Office Address: Judith "Jude" C. Skallerup
325 E. Galena
Aurora, IL 60505

Phone: (630) 966-0252

Fax: (630) 966-0005

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-004615, CSOTS

William "Kip" Hillman, Psy.D.

Name & Main Office Address: William "Kip" Hillman, Psy.D.
4064 N. Lincoln, #290
Chicago, IL 60618

Phone: (312) 933-0060

Fax: (773) 989-0275

Email: kiphillman@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Psychology 071-003686



Sex Offender Management Board Approved Provider List - By County



DeWitt

ABC Counseling and Family Services

Name & Main Office Address: Lynn Willard, MA, MSW
705 E. Lincoln
Normal, IL 61761

Phone: (309) 451-9495
Fax: (309) 451-9404
Email: lwillard@abccounseling.org
Language(s): English
Licenses: IL LCPC #180-004238

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Art Therapy and Counseling Services

Name & Main Office Address: Laurie A. Cox
101 E. College Avenue, Suite D
Normal, IL 61761

Phone: (309) 452-5326
Fax: (309) 452-5356
Email: coxlaurie@msn.com
Language(s): English
Licenses: IL LCPC, CADC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Cokley, Sunderland & Cokley

Name & Main Office Address: Robert L. Cokley, Ph.D.
348 West Prairie Avenue, Suite
Decatur, IL 62522

Phone: (217) 422-0053
Fax: (217) 422-0374
Email:
Language(s): English
Licenses: IL LCSW- #149-000865, Doctorate

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Community Resource and Counseling Center

Name & Main Office Address: Laurelyn Cropek
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: crcc@illicom.net
Language(s): English
Licenses: IL LCSW-149-005667

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Laurie A. Gilbert
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: lgilbert@4crcc.org
Language(s): English
Licenses: IL LCSW-149-010484

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Christine Mayer
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: ccrc@illicom.net
Language(s): English
Licenses: IL LCSW-149.009275

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



DeWitt

Community Resource and Counseling Center

Name & Main Office Address: Jeffrey C. Reynolds
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: jreynolds@4crcc.org
Language(s): English
Licenses: IL LCPC #180-004199

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Midwest Counseling

Name & Main Office Address: Bryan Denure
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885
Fax:
Email:
Language(s): English
Licenses: IL LPC #180-005002, CRADC

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Keir L. Goatley
917 Clocktower Dr. #420
Springfield, IL 62704

Phone: (217) 726-8744
Fax:
Email: kgoatley@ameritech.net
Language(s): English
Licenses: IL LCPC-#180-004321, (IDPR), CCBT, ATLSA, IL-ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Gil Pilapil
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885
Fax:
Email:
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

DuPage

Adelante, P.C.

Name & Main Office Address: Eileen Arzani
1608 N. Milwaukee, Suite 407
Chicago, IL 60647

Phone: (773) 486-0031
Fax: (773) 486-1891
Email:
Language(s): English , Spanish
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Evaristo Ruiz
1608 N. Milwaukee, Suite 407
Chicago, IL 60647

Phone: (773) 486-0031
Fax: (773) 486-1891
Email:
Language(s): English , Italian , Spanish
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



DuPage

Adelante, P.C.

Name & Main Office Address: Karen Stanbary
1608 N. Milwaukee, Suite 407
Chicago, IL 60647

Phone: (773) 486-0031

Fax: (773) 486-1891

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English , Spanish

Licenses: IL LCSW

Affiliated Psychologists, LTD

Name & Main Office Address: Patrick Hoatlin, LCSW
4801 W. Peterson Avenue, Suite 525
Chicago, IL 60646

Phone: (773) 286-3100

Fax: (773) 777-7543

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-011120

Name & Main Office Address: Barry M. Leavitt, Psy.D.
4801 W. Peterson Avenue, Suite 525
Chicago, IL 60646

Phone: (773) 286-3100

Fax: (773) 777-7543

Email: ckopeny@ap-ltd.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, Hare Psychopathy Checklist (PCL-R) Certification

Name & Main Office Address: Ray Quackenbush
4801 W. Peterson Avenue, Suite 525
Chicago, IL 60646

Phone: (773) 286-3100

Fax: (773) 777-7543

Email: quaq@earthlink.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Psychology License #091-006293, Clinical Member ATSA

Name & Main Office Address: Phil Reidda, Ph.D.
4801 W. Peterson Avenue, Suite 525
Chicago, IL 60646

Phone: (773) 286-3100

Fax: (773) 777-7543

Email: ckopeny@ap-ltd.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, Hare Psychopathy Checklist (PCL-R) Certification, Diplomat American Board Professional Psychologists

Name & Main Office Address: Laura T. Schultz, Psy.D.
4801 W. Peterson Avenue, Suite 525
Chicago, IL 60646

Phone: (773) 286-3100

Fax: (773) 777-7543

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP

Name & Main Office Address: Pamela C. Van Wyk
4801 W. Peterson Avenue, Suite 525
Chicago, IL 60646

Phone: (765) 721-7863

Fax: (773) 777-7543

Email: pcvw811@illicom.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL-LCPC, IN-LMHC, AL-LMFT, ATSA Clinical Member



Sex Offender Management Board Approved Provider List - By County



DuPage

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Michael Albert 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: malbert@abtc-centers Language(s): English Licenses: IL LPC
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Jenny Anderson 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 587-7905 Fax: (847) 487-9360 Email: janderson@abtc-centers.org Language(s): English Licenses: IL LSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Jenifer Brickman 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: jbrickman@abtc-centers.org Language(s): English Licenses: IL LCSW-149-010065
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Arturo Gudino, Jr. 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 x226 Fax: (708) 386-8145 Email: agudino@abtc-centers.org Language(s): English , Spanish Licenses: IL LCPC#180-004330
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Michael Igaravidez, Psy.D. 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 386-8145 Email: migaravidez@abtc-centers.org Language(s): English Licenses: IL LCP #071-006172
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Theresa Jackson 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 848-6176 Email: tjackson@abtc-centers.org Language(s): English Licenses: IL LSW-#150-006805
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Dawn Livorsi 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: dlivorsi@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



DuPage

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Deborah May 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: dmay@abtc-centers.org Language(s): English Licenses: IL LCSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Robin McGinnis, MSW 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: rmcginnis@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Becky Palmer 715 Lake Street Oak Park, IL 60301	Phone: (708) 386-8145 x23 Fax: (708) 848-6176 Email: bpalmer802@aol.com Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Melissa Pannell 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x145 Fax: (847) 487-9360 Email: mpannell@abtc-centers.org Language(s): English Licenses: IL LPC, ABEL Certified
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Lauren Parks 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x146 Fax: (847) 487-9360 Email: lparks@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Kevin J. Robson 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x165 Fax: (847) 487-9037 Email: krobson@abtc-centers.org Language(s): English Licenses: First Aid, CPR Part I, Surrogate PatientTrainer
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Eva San Pedro 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 386-8145 Email: esanpedro@abtc-centers.org Language(s): English , Spanish Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



DuPage

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:	Carolyn Seaman 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x135 Fax: (847) 487-9360 Email: cseaman@abtc-centers.org Language(s): English Licenses: None
Services Provided:		
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications: Yes
Name & Main Office Address:	Natalie Seel 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: nseel@abtc-centers.org Language(s): English Licenses: LSW
Services Provided:		
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications: Yes
Name & Main Office Address:	Edgar F. Sherk 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: esherk@abtc-centers.org Language(s): English Licenses: IL LCSW #149-002963
Services Provided:		
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications: Yes
Name & Main Office Address:	Susan Urban 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9037 Email: surban@abtc-centers.org Language(s): English Licenses: IL LCSW #149-011169
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications: Yes
Name & Main Office Address:	Keef Weinstein 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: kweinstein@abtc-centers.org Language(s): English Licenses: IL LPC
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications: Yes
Name & Main Office Address:	Karen Wolownik, MSW 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: kwolownik@abtc-centers.org Language(s): English Licenses: IL-LCSW #149-010954, CSW (Michigan), Certified Adolescent Sexual Offender Prof.
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications: Yes

Center for Contextual Change

Name & Main Office Address:	Don R.J. Castaldi, Psy.D. 9239 Gross Point Road, Suite 300 Skokie, IL 60077	Phone: (708) 524-1301 x2 Fax: (708) 524-1401 Email: donc@centerforcontextualchange.org Language(s): English Licenses: Advanced Training in Abel Screen
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications: Yes



Sex Offender Management Board Approved Provider List - By County



DuPage

Center for Contextual Change

Name & Main Office Address: Don R.J. Castaldi, Psy.D.
125 N. Marion Street, Suite 201
Oak Park, IL 60301

Phone: (708) 524-1301 x2
Fax: (708) 524-1401
Email: donc@centerforcontextualchange.org
Language(s): English
Licenses: Advanced Training in Abel Screen

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Joseph J. Cortese
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (847) 676-4447 x312
Fax: (847) 676-4450
Email: cortese1@comcast.net
Language(s): English
Licenses: IL LCSW #149-000645

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Peg Duros
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (847) 676-4447 x221
Fax: (847) 676-4450
Email: pegd@centerforcontextualchange.org
Language(s): English
Licenses: IL LCSW #149-002016

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Joel A. Falco, MA, LCSW
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (847) 674-4447 x300
Fax: (847) 676-4450
Email: hopecat@hotmail.com
Language(s): English
Licenses: IL LCSW, Clinical Member of ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Joel A. Falco, MA, LCSW
125 N. Marion Street, Suite 201
Oak Park, IL 60301

Phone: (847) 674-4447 x300
Fax: (847) 676-4450
Email: hopecat@hotmail.com
Language(s): English
Licenses: IL LCSW, Clinical Member of ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Michael "Mike" Just
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (847) 676-4447 x301
Fax: (847) 676-4450
Email: justmikejust@sbcglobal.net
Language(s): English
Licenses: IL LCPC #180-006042; Attorney

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Michael "Mike" Just
125 N. Marion Street, Suite 201
Oak Park, IL 60301

Phone: (847) 676-4447 x301
Fax: (847) 676-4450
Email: justmikejust@sbcglobal.net
Language(s): English
Licenses: IL LCPC #180-006042; Attorney

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



DuPage

Center for Contextual Change

Name & Main Office Address: Kelli Underwood
125 N. Marion Street, Suite 201
Oak Park, IL 60301

Phone: (847) 676-4447 x223
Fax: (847) 676-4450
Email: kelliunderwoodccc@hotmail.com
Language(s): English
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Chicago Christian Counseling Center

Name & Main Office Address: Anne Krick
15127 S. 73rd Avenue, Suite G
Orland Park, IL 60462

Phone: (708) 845-5500 x106
Fax: (708) 845-5504
Email: akrick@chicagochristioncounseling.org
Language(s): English
Licenses: IL LCP #071-005562

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Chuck Lederman, LCSW

Name & Main Office Address: Chuck Lederman, LCSW
68 Main Street, P. O. Box 95
Oswego, IL 60543

Phone: (630) 269-3146
Fax: (630) 551-0988
Email: chuck60543@aol.com
Language(s): English
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Cornerstone Clinical Associates, Ltd.

Name & Main Office Address: Warren B. Matson
300 S. County Farm Road, #E
Wheaton, IL 60187

Phone: (630) 871-0770
Fax: (630) 871-0772
Email: wmatson@email.com
Language(s): English
Licenses: LCPC, ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Forensic Psych Associates, Ltd.

Name & Main Office Address: Robert H. Gordon, Ph.D.
203 N. LaSalle Street, #2100
Chicago, IL 60601

Phone: (312) 917-1610
Fax: (608) 756-5174
Email: rgordon@forensicpsych.com
Language(s): English
Licenses: IL LCP

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Forensic Psychology Associates

Name & Main Office Address: Mark Brenzinger, PsyD
445 E. Ohio, Suite 450
Chicago, IL 60611

Phone: (312) 740-9691
Fax: (312) 527-9088
Email: ciba9@worldnet.att.net
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



DuPage

Forensic Psychology Associates

Name & Main Office Address: Eric Ostrov, J.D., Ph.D., ABPP
445 E. Ohio, Suite 450
Chicago, IL 60611

Phone: (312) 740-9691
Fax: (312) 527-9088
Email: eostrov@aol.com
Language(s): English
Licenses: IL Psy.D. 071-001951, IL Attorney #3128938

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Susan Page, Psy.D.
445 E. Ohio, Suite 450
Chicago, IL 60611

Phone: (312) 399-3140
Fax: (312) 527-9088
Email: slpage27@aol.com
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

IDHS Treatment & Detention Facility

Name & Main Office Address: Michael P. Bednarz, MD
401 Woodruff Road
Joliet, IL 60432

Phone: (815) 740-8781 x232
Fax: (815) 740-8817
Email: dhs41an@dhs.state.il.us
Language(s): English
Licenses: Licensed Physician & Surgeon; Controlled License (substance); DEA License; Brd cert internal medicine & psychiatrist

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Mark Brenzinger, PsyD
401 Woodruff Road
Joliet, IL 60432

Phone: (815) 740-8781
Fax: (815) 740-8817
Email: ciba9@worldnet.att.net
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Robert Brucker, Jr.
401 Woodruff Road
Joliet, IL 60432

Phone: (815) 740-8781
Fax: (815) 740-8817
Email: dhs4140@dhs.state
Language(s): English
Licenses: IL LCP-071-006097

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Lea B. Chankin, Psy.D.
401 Woodruff Road
Joliet, IL 60432

Phone: (815) 740-8781
Fax: (815) 740-8817
Email: dhs4120@dhs.state.il.us
Language(s): English
Licenses: IL LCP-071-006553

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Jeffrey C. Clausen
401 Woodruff Road
Joliet, IL 60432

Phone: (815) 740-8781
Fax: (815) 740-8817
Email: jclausen@mc.net
Language(s): English
Licenses: IL LCPC 180-005378

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



DuPage

IDHS Treatment & Detention Facility

Name & Main Office Address:		Detraill Dearbone-Collins 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: dearbon@cs.com Language(s): English Licenses: IL LCPC, CADAC, CCJS
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		William DuBois 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 x251 Fax: (815) 740-8817 Email: Language(s): English Licenses: IL LPC #178-004016
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Catherine A. Furtado, Psy.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: dhs41cp@dhs.state.il.us Language(s): English Licenses: None
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Steve Gaskell 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 x246 Fax: (815) 207-1538 Email: drsdg71@gmail.com Language(s): English Licenses: IL LCP #71006877; GA #002566
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	No
Treatment ?	No	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Guy Groot 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: g.groot@mchsi.com Language(s): English Licenses: IL LCPC, CADAC, MISA II
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Shan Jumper 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 x221 Fax: (815) 740-8817 Email: dhs4115@dhs.state.il.us Language(s): English Licenses: IL LCP 071-006021
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Carey Lavaux 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8810 Email: dhs4141@dhs.state.il.us Language(s): English Licenses: IL LPC-#178-001064
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		



Sex Offender Management Board Approved Provider List - By County



DuPage

IDHS Treatment & Detention Facility

Name & Main Office Address:	Chad Lewing 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: chadlewing@comcast.net Language(s): English Licenses: None
<i>Services Provided:</i>		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	No	All applicant attestation qualifications: Yes
Name & Main Office Address:	Kimberly S. Litton, Psy.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: dhs41bb@dhs.state.il.us Language(s): English Licenses: None
<i>Services Provided:</i>		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	No	All applicant attestation qualifications: Yes
Name & Main Office Address:	Scott W. Maieritsch, Ph.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: dhs4139@dhs.state.il.us Language(s): English Licenses: None
<i>Services Provided:</i>		
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	No	All applicant attestation qualifications: Yes
Name & Main Office Address:	Rhoda Meacham 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 x266 Fax: (815) 740-8817 Email: Language(s): English Licenses: LCSW #149-011604
<i>Services Provided:</i>		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	No	All applicant attestation qualifications: Yes
Name & Main Office Address:	Shane M. Reister, Psy.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8780 Email: shanemreister@hotmail.com Language(s): English Licenses: IL LCP#071-007001
<i>Services Provided:</i>		
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	No	All applicant attestation qualifications: Yes
Name & Main Office Address:	Janet Sand 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: dhs41A6@dhs.state.il.us Language(s): English Licenses: None
<i>Services Provided:</i>		
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	No	All applicant attestation qualifications: Yes
Name & Main Office Address:	Craig Schiesser, Psy.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: Language(s): English Licenses: IL LCP-#071-005597
<i>Services Provided:</i>		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	No	All applicant attestation qualifications: Yes



Sex Offender Management Board Approved Provider List - By County



DuPage

IDHS Treatment & Detention Facility

Name & Main Office Address:		Karen Smith 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: karenspc@yahoo.com Language(s): English Licenses: IL LCPC
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Thomas J. Speaker, Ph.D., LCPC 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: tspeaker@sbcglobal.net Language(s): English Licenses: IL LCPC #180-003801, CADC III, WI LCSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Natasha Stumpf 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: Language(s): English Licenses: IL LPC-#178-002746, NCC
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Sylvia Sun 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: psysun@yahoo.com Language(s): English , Mandarin Licenses: IL LCP #071-005619
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Phyllis Tolley 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: Language(s): Cantonese , English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Richard D. "Bo" Travis, MA, LCPC 401 Woodruff Road Joliet, IL 60432	Phone: (815) 723-2844 Fax: (815) 740-8817 Email: botravis@earthlink.net Language(s): English Licenses: IL LCPC-#180-003461
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Brent Ulrich 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 x251 Fax: (815) 740-8817 Email: blurich623@juno.com Language(s): English Licenses: LPC #178-004133
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		



Sex Offender Management Board Approved Provider List - By County



DuPage

IDHS Treatment & Detention Facility

Name & Main Office Address:	Raymond Wood, Ph.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 x220 Fax: (815) 740-8817 Email: dhs4108@dhs.state.il.us Language(s): English Licenses: IL LCP-#071-005813
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ? Yes	All treatment provider qualifications? Yes	
Treatment ? Yes	All evaluation provider qualifications? Yes	
Adult ? Yes	All applicant attestation qualifications: Yes	
Juvenile ? No		

Indian Oaks Academy

Name & Main Office Address:	Daphne Bogenscheider 101 Bramble Manteno, IL 60950	Phone: (815) 802-3700 Fax: (815) 468-2310 Email: Language(s): English Licenses: LCPC, EMDR Level I, CANS, CERAP
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ? Yes	All treatment provider qualifications? Yes	
Treatment ? Yes	All evaluation provider qualifications? Yes	
Adult ? No	All applicant attestation qualifications: Yes	
Juvenile ? Yes		

Name & Main Office Address:	Michael Chavers 101 Bramble Manteno, IL 60950	Phone: (815) 802-3738 Fax: (815) 468-2310 Email: Language(s): English Licenses: None
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ? Yes	All treatment provider qualifications? Yes	
Treatment ? Yes	All evaluation provider qualifications? Yes	
Adult ? No	All applicant attestation qualifications: Yes	
Juvenile ? Yes		

Name & Main Office Address:	Thomas Duff 101 Bramble Manteno, IL 60950	Phone: (815) 802-3700 Fax: (815) 468-2310 Email: dufft@nexus-ioa.org Language(s): English Licenses:
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ? Yes	All treatment provider qualifications? Yes	
Treatment ? Yes	All evaluation provider qualifications? Yes	
Adult ? No	All applicant attestation qualifications: Yes	
Juvenile ? Yes		

Name & Main Office Address:	Andrew Fisher 101 Bramble Manteno, IL 60950	Phone: (815) 802-3700 Fax: (815) 468-2310 Email: fishera@nexus-ioa.org Language(s): English Licenses: IL LCPC
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ? Yes	All treatment provider qualifications? Yes	
Treatment ? No	All evaluation provider qualifications? Yes	
Adult ? Yes	All applicant attestation qualifications: Yes	
Juvenile ? Yes		

Name & Main Office Address:	Sara E. Langevin, MA 101 Bramble Manteno, IL 60950	Phone: (815) 802-3700 Fax: (815) 468-2310 Email: langevins@nexus-ioa.org Language(s): English Licenses:
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ? Yes	All treatment provider qualifications? Yes	
Treatment ? Yes	All evaluation provider qualifications? Yes	
Adult ? No	All applicant attestation qualifications: Yes	
Juvenile ? Yes		

Name & Main Office Address:	Amber Residori, LCSW 101 Bramble Manteno, IL 60950	Phone: (815) 802-3700 Fax: (815) 468-2310 Email: residori@nexus-ioa.org Language(s): English , French Licenses: IL LCSW
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ? Yes	All treatment provider qualifications? Yes	
Treatment ? Yes	All evaluation provider qualifications? Yes	
Adult ? No	All applicant attestation qualifications: Yes	
Juvenile ? Yes		



Sex Offender Management Board Approved Provider List - By County



DuPage

Indian Oaks Academy

Name & Main Office Address: William K. Robison
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3713

Fax: (815) 468-2310

Email: robisonw@Nexus-IOA.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Clinical Psychology #071-006191; IL MFT 166-000144

Kevin & Associates

Name & Main Office Address: Maureen Kevin, LCSW
110 Cottage Hill, Suite 305
Elmhurst, IL 60126

Phone: (630) 941-8270

Fax: (630) 941-8294

Email: mureenkevin@hotmail.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-000550

Latino Family Services, P.C.

Name & Main Office Address: Arturo Hurtado, LCSW, ACSW
825 E. Golf Road, Suite 1133
Arlington Heights, IL 60005-5200

Phone: (847) 593-7077

Fax: (847) 593-7056

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English, Spanish

Licenses: IL LCSW-#149-005124, ACSW, ATSA Clinical Member

Laurie L. Riehm, LCSW

Name & Main Office Address: Laurie L. Riehm, LCSW
P.O. Box 1224
St. Charles, IL 60174

Phone: (630) 587-5631

Fax: (630) 587-5631

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW, American College of Forensic Examiners-Certified Clinical Criminal Justice Specialist

Marcy Pritzen, LCSW

Name & Main Office Address: Marcy Pritzen, LCSW
3295 N. Arlington Heights Rd, Suite 103
Arlington Heights, IL 60004

Phone: (847) 636-6364

Fax: (847) 398-6595

Email: mpritzen@mindspring.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-005331

McKibbin, MS, LCPC, Alex E.

Name & Main Office Address: Alex E. McKibbin, MS, LCPC
24402 W. Lockport, Suite 2-B
Plainfield, IL 60544

Phone: (630) 456-2519

Fax: (815) 230-3652

Email: a.mckibbin@att.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-001736



Sex Offender Management Board Approved Provider List - By County



DuPage

Michael R. Davison

Name & Main Office Address: Michael R. Davison
3295 N. Arlington Heights Road, Suite 103
Arlington Heights, IL 60004

Phone: (847) 788-0645

Fax: (847) 398-6595

Email: apsychdoc@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071005-382

Nickerson and Associates

Name & Main Office Address: Jerry Lowell
P.O. Box 239 (also office in Chicago)
Winfield, IL 60190

Phone: (630) 707-7380

Fax: (630) 839-5068

Email: jlowellLCSW@msn.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-003408

Name & Main Office Address: Debra Nickerson, Psy.D.
P.O. Box 239 (also office in Chicago)
Winfield, IL 60190

Phone: (630) 752-9725

Fax: (630) 752-9726

Email: tnick@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP # 071-006020

Oak Forest Psychological Service, P.C.

Name & Main Office Address: Mitchell Hicks, Ph.D., LCPC
6320 W. 159th Street, Suite E
Oak Forest, IL 60452

Phone: (708) 429-2777 x27

Fax:

Email: mwhicks@drmittelhicks.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-005185, IL LCP #071-006835,
Clinical Member of ATSA

Name & Main Office Address: Dr. Barbra Kraus
6320 W. 159th Street, Suite E
Oak Forest, IL 60452

Phone: (708) 429-2777

Fax: (708) 429-2780

Email: bkraus@oakforestpsych.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP-#071-006308

RITAS Ministry

Name & Main Office Address: Judith "Jude" C. Skallerup
325 E. Galena
Aurora, IL 60505

Phone: (630) 966-0252

Fax: (630) 966-0005

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-004615, CSOTS



Sex Offender Management Board Approved Provider List - By County



DuPage

Robinson, LCSW, Shirley R.

Name & Main Office Address: Shirley R. Robinson
24829 S. Tryon Street
Channahon, IL 60410

Phone: (815) 467-5552
Fax:
Email: shirley.robinson@comcast.net
Language(s): English
Licenses: LCSW, BCD

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Simmons and Associates, Inc.

Name & Main Office Address: Ronald C. Simmons, Psy.D.
P.O. Box 772
Lemont, IL 60439

Phone: (630) 257-6690
Fax: (630) 257-6690
Email: rcsandassoc@aol.com
Language(s): English
Licenses: IL LCPC #180-000152

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Suire, Ph.D., David M.

Name & Main Office Address: David M. Suire, Ph.D.
1012 W. Columbia, Bldg 28
Farmington, MO 63640

Phone: (573) 330-5402
Fax:
Email: davidsuire@yahoo.com
Language(s): English
Licenses: IL Psychologist 071-006216; MO Clinical Psychologist; TX Clinical Psychologist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

William "Kip" Hillman, Psy.D.

Name & Main Office Address: William "Kip" Hillman, Psy.D.
4064 N. Lincoln, #290
Chicago, IL 60618

Phone: (312) 933-0060
Fax: (773) 989-0275
Email: kiphillman@yahoo.com
Language(s): English
Licenses: IL Psychology 071-003686

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Edgar

Human Resources Center of Edgar & Clark Counties

Name & Main Office Address: Rita C. Hay
118 E. Court Street
Paris, IL 61944

Phone: (217) 465-4118
Fax: (217) 826-3682
Email: rita.hay@hrcec.org
Language(s): English
Licenses:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Rod Neeson
118 E. Court Street
Paris, IL 61944

Phone: (217) 465-4118
Fax: (217) 463-1899
Email: rod.neeson@HRCEC.org
Language(s): English
Licenses: IL LCPC #180-000647, National Board Certified Counselor, Masters Addiction Counselor

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Edgar

Human Resources Center of Edgar & Clark Counties

Name & Main Office Address: Kimberly B. Smith
118 E. Court Street
Paris, IL 61944

Phone:
Fax:
Email: kim.smith@hrcec.org
Language(s): English
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Edwards

Gary Lemmon and Associates, Inc.

Name & Main Office Address: Gary L. Lemmon
904 E. Main
Norris City, IL 62869

Phone: (618) 378-3010
Fax: (618) 378-2308
Email: glemmon@shawneelink.net
Language(s): English
Licenses: IL LCSW-#149-00164, Clinical Member ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Stanislaus, MD, Angeline

Name & Main Office Address: Angeline Stanislaus, M.D.
621 S. New Ballas Road, Suite 268A
St. Louis, MO 63141

Phone: (618) 791-1777
Fax:
Email:
Language(s): English
Licenses: IL Medical License #036-102686 ; Certification in Forensic Psychiatry

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Effingham

Bohlen & Associates, SC

Name & Main Office Address: Joseph G. Bohlen, MD, Ph.D.
3001 Spring Mill Drive, Suite D
Springfield, IL 62704

Phone: (217) 546-3100
Fax: (217) 546-3284
Email:
Language(s): English
Licenses: IL Physicians & Surgeons

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Brown Counseling & Consulting

Name & Main Office Address: Jeffrey R. Brown
2622 Washington Avenue
Vincennes, IN 47591

Phone: (812) 887-5431
Fax: (812) 886-3010
Email: lazlo81@charter.net
Language(s): English
Licenses: ACSW; LCSW, IL #148-008300 & IN #34001119A; CADC III; ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Effingham County Probation Office

Name & Main Office Address: Sandy Taylor, MS, LCPC
106 N. Third Street
Effingham, IL 62401-3456

Phone: (217) 347-7931
Fax: (217) 347-2001
Email: sandy_taylor9@yahoo.com
Language(s): English
Licenses: IL LCPC #180-005527

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Fayette

Alternatives Counseling, Inc.

Name & Main Office Address: Donya Adkerson, MA
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085
Fax: (618) 288-8959
Email: donya2@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC-180-000271

Name & Main Office Address: Bethany A. Munge, M.A., Q.M.H.P.
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085 x202
Fax: (618) 288-8959
Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Community Resource Center

Name & Main Office Address: Thomas Sims
101 S. Locust Street
Centralia, IL 62801

Phone: (618) 533-1391
Fax: (618) 533-0012
Email: simstwo@yahoo.com

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LPC 178-003866

Name & Main Office Address: Dale H. Spittler
101 S. Locust Street
Centralia, IL 62801

Phone: (618) 533-1391
Fax: (618) 533-0012
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW #149-003298, Academy of Certified Social Workers

Darlene M. Bushue, M.A., LCPC

Name & Main Office Address: #Error

Phone: (618) 444-7736
Fax:
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC 180-004485

Effingham County Probation Office

Name & Main Office Address: Sandy Taylor, MS, LCPC
106 N. Third Street
Effingham, IL 62401-3456

Phone: (217) 347-7931
Fax: (217) 347-2001
Email: sandy_taylor9@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC #180-005527



Sex Offender Management Board Approved Provider List - By County



Ford

Art Therapy and Counseling Services

Name & Main Office Address: Laurie A. Cox
101 E. College Avenue, Suite D
Normal, IL 61761

Phone: (309) 452-5326
Fax: (309) 452-5356
Email: coxlaurie@msn.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC, CADAC

Community Resource and Counseling Center

Name & Main Office Address: Laurelyn Cropek
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: crcc@illicom.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW-149-005667

Name & Main Office Address: Laurie A. Gilbert
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: lgilbert@4crcc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW-149-010484

Name & Main Office Address: Christine Mayer
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: ccrc@illicom.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW-149.009275

Name & Main Office Address: Jeffrey C. Reynolds
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: jreynolds@4crcc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC #180-004199

Dr. James Simone and Associates, LLC

Name & Main Office Address: James Simone
201 Park Place, Suite 2
Bourbannais, IL 60914

Phone: (815) 258-6685
Fax: (815) 468-5463
Email: jimdoc21@hotmail.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP #071-005467



Sex Offender Management Board Approved Provider List - By County



Ford

Kleppin, MS.Ed., LCPC, CADC, Kleppin

Name & Main Office Address: Michael Kleppin, MS.Ed., LCPC, CADC
P. O. Box 416
Saboy, IL 61874

Phone: (217) 398-0413

Fax: (217) 239-6616

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-#180-005001, CADC

Kling, Joanna M.Ed., LCPC

Name & Main Office Address: Joanna Kling, M.Ed., LCPC
507 W. Springfield Avenue
Urbana, IL 61801

Phone: (217) 344-4722

Fax: (217) 344-4733

Email: jokling611@insightbb.com

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, NBCC

Onarga Academy

Name & Main Office Address: Rebecca Cunningham
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001

Fax: (815) 268-7977

Email: rcunnin@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-001150

Name & Main Office Address: William D. Featherstone
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001

Fax: (815) 268-7977

Email: bfeathe@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses:

Name & Main Office Address: Douglas C. Gossett, M.A., LCPC
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001

Fax: (815) 268-7977

Email: dgosset@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-005298

Name & Main Office Address: Jamie Kozma
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001

Fax: (815) 268-7977

Email: jkozma@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

Name & Main Office Address: Bill Mitchell
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001

Fax: (815) 268-7977

Email: wmitche@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None



Sex Offender Management Board Approved Provider List - By County



Ford

Onarga Academy

Name & Main Office Address: Karen Robertie
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: krobert@nexus-ona.org
Language(s): English
Licenses: IL LCPC 180-005314

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Michael D. Simpson
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: msimpso@nexus-ona.org
Language(s): English
Licenses: IL LCPC 180-005921

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Tricia Renee St. Pierre
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: tstpier@nexus-ona.org
Language(s): English
Licenses: NCC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Ryan Weidenbenner
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: rweiden@nexus-ong.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Timothy E. White
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: twhite@nexus-ona.org
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Franklin

Gary Lemmon and Associates, Inc.

Name & Main Office Address: Gary L. Lemmon
904 E. Main
Norris City, IL 62869

Phone: (618) 378-3010
Fax: (618) 378-2308
Email: glemmon@shawneelink.net
Language(s): English
Licenses: IL LCSW-#149-00164, Clinical Member ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Franklin

Kosmicki, Ph.D., Frank X.

Name & Main Office Address: Frank X. Kosmicki, Ph.D.
231 W. Main Street
Carbondale, IL 62901

Phone: (618) 203-6730

Fax: (618) 529-3171

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-006668

Linda Stover and Associates

Name & Main Office Address: Linda Stover, M.S.Ed, LCPC, CCJS, CSOTS
417 E. Calumet
Centralia, IL 62801

Phone: (618) 322-2811

Fax: (618) 532-6805

Email: lstover@netwitz.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, Certified Criminal Justice Specialist,
ATSA Member, Certified Sex Offender
Treatment Specialist

Michael E. Althoff, Ph.D.

Name & Main Office Address: Michael E. Althoff, Ph.D.
201 E. Main, Suite 3D
Carbondale, IL 62901

Phone: (618) 549-3587

Fax: (618) 549-2695

Email: mealthoff@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, IL Clinical Member - ATSA

Stanislaus, MD, Angeline

Name & Main Office Address: Angeline Stanislaus, M.D.
621 S. New Ballas Road, Suite 268A
St. Louis, MO 63141

Phone: (618) 791-1777

Fax:

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Medical License #036-102686 ; Certification
in Forensic Psychiatry

Fulton

9th Judicial Circuit

Name & Main Office Address: Tye Adair
130 Lafayette, Suite 10
Macomb, IL 61455

Phone: (309) 837-2307

Fax: (309) 833-5570

Email: tadair@9thjudicial.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Knox County Juvenile Detention Home - Court Services, 9th Judicial

Name & Main Office Address: Stewart Nyi
1319 E. 5th
Galesburg, IL 61401

Phone: (309) 342-2481

Fax: (309) 343-7922

Email: snyi@9thjudicial.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-001104



Sex Offender Management Board Approved Provider List - By County



Fulton

Lutheran Social Services of Illinois

Name & Main Office Address: Dee Ann Foss
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x271
Fax: (309) 671-0503
Email: deeanne.foss-reimers@lssi.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Yvonne Wojtalik
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x245
Fax: (309) 671-0503
Email: yvonne.wojtalik@lssi.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

P. F. Dover Counseling, LLC

Name & Main Office Address: James R. Seavey
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 495-4924
Fax: (309) 495-4993
Email: jspfdovercounseling@yahoo.com
Language(s): English
Licenses: IL LCPC #180-001434

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Scott A. Smith
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 477-2278
Fax: (309) 477-3113
Email: sspfdovercounseling@yahoo.com
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Resolutions Unlimited

Name & Main Office Address: Michael S. Shear, Psy.D.
456 Fulton Street, Suite 101
Peoria, IL 61602

Phone: (309) 673-9385
Fax: (309) 673-9446
Email:
Language(s): English
Licenses: IL LCPC-#180-004648

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Gallatin

Gary Lemmon and Associates, Inc.

Name & Main Office Address: Gary L. Lemmon
904 E. Main
Norris City, IL 62869

Phone: (618) 378-3010
Fax: (618) 378-2308
Email: glemmon@shawneelink.net
Language(s): English
Licenses: IL LCSW-#149-00164, Clinical Member ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Gallatin

Michael E. Althoff, Ph.D.

Name & Main Office Address: Michael E. Althoff, Ph.D.
201 E. Main, Suite 3D
Carbondale, IL 62901

Phone: (618) 549-3587
Fax: (618) 549-2695
Email: mealthoff@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP, IL Clinical Member - ATSA

Greene

Alternatives Counseling, Inc.

Name & Main Office Address: Donya Adkerson, MA
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085
Fax: (618) 288-8959
Email: donya2@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC-180-000271

Name & Main Office Address: Bethany A. Munge, M.A., Q.M.H.P.
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085 x202
Fax: (618) 288-8959
Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Darlene M. Bushue, M.A., LCPC

Name & Main Office Address: #Error

Phone: (618) 444-7736
Fax:
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC 180-004485

Grundy

7th Fire Counseling

Name & Main Office Address: Leo J. Meagher
218 W. Madison Street
Ottawa, IL 61350

Phone: (815) 433-4829
Fax: (815) 433-4028
Email: chawk@mtco.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC, Clinically Cert. Forensic Counselor, Clinically Cert. DV Counselor, Cert. Clinical Criminal Justice Specialist, Master Addiction Counselor, Cert. Diplomate in Clinical Hypnotic

Chuck Lederman, LCSW

Name & Main Office Address: Chuck Lederman, LCSW
68 Main Street, P. O. Box 95
Oswego, IL 60543

Phone: (630) 269-3146
Fax: (630) 551-0988
Email: chuck60543@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW



Sex Offender Management Board Approved Provider List - By County



Grundy

Kane County Diagnostic Center

Name & Main Office Address:	Timothy Brown, Psy.D. 757 E. Fabyan Parkway Batavia, IL 60510	Phone: (630) 262-4480 Fax: (630) 262-4484 Email: browntimothy@co.kane.il.us Language(s): English Licenses: IL LCP #071-003827
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ?	Yes	
Treatment ?	No	All treatment provider qualifications? No
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Name & Main Office Address:	Lesley Kane, Psy.D. 757 E. Fabyan Parkway Batavia, IL 60510	Phone: (630) 262-4480 Fax: (630) 262-4484 Email: kanelesley@co.kane.il.us Language(s): English Licenses: IL LCP #071-006757
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ?	Yes	
Treatment ?	No	All treatment provider qualifications? No
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Name & Main Office Address:	Mark J. Kuzia, Psy.D. 757 E. Fabyan Parkway Batavia, IL 60510	Phone: (630) 262-4480 Fax: (630) 262-4484 Email: mjkuzia@netzero.com Language(s): English Licenses: None
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ?	Yes	
Treatment ?	No	All treatment provider qualifications? No
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Name & Main Office Address:	Amanda Rosenkoetter 757 E. Fabyan Parkway Batavia, IL 60510	Phone: (630) 262-4480 Fax: (630) 262-4484 Email: ajrosenkoetter@comcast.net Language(s): English Licenses: IL LCP
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ?	Yes	
Treatment ?	No	All treatment provider qualifications? No
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Name & Main Office Address:	Alexandra Tsang, Psy.D. 757 E. Fabyan Parkway Batavia, IL 60510	Phone: (630) 444-1081 Fax: (630) 262-4484 Email: tsangalexandra@co.kane.il.us Language(s): English , Polish Licenses: IL LCP
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ?	Yes	
Treatment ?	No	All treatment provider qualifications? No
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Robinson, LCSW, Shirley R.

Name & Main Office Address:	Shirley R. Robinson 24829 S. Tryon Street Channahon, IL 60410	Phone: (815) 467-5552 Fax: Email: shirley.robinson@comcast.net Language(s): English Licenses: LCSW, BCD
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ?	No	
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications? Yes



Sex Offender Management Board Approved Provider List - By County



Hamilton

Gary Lemmon and Associates, Inc.

Name & Main Office Address: Gary L. Lemmon
904 E. Main
Norris City, IL 62869

Phone: (618) 378-3010
Fax: (618) 378-2308
Email: glemmon@shawneelink.net
Language(s): English
Licenses: IL LCSW-#149-00164, Clinical Member ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Jefferson County Comprehensive Services

Name & Main Office Address: Linda Stover, M.S.Ed, LCPC, CCJS, CSOTS
P.O. Box 428
Mount Vernon, IL 62864

Phone: (618) 322-2811
Fax: (618) 532-6805
Email: lstover@netwitz.net
Language(s): English
Licenses: IL LCPC, Certified Criminal Justice Specialist, ATSA Member, Certified Sex Offender Treatment Specialist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Michael E. Althoff, Ph.D.

Name & Main Office Address: Michael E. Althoff, Ph.D.
201 E. Main, Suite 3D
Carbondale, IL 62901

Phone: (618) 549-3587
Fax: (618) 549-2695
Email: mealthoff@aol.com
Language(s): English
Licenses: IL LCP, IL Clinical Member - ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Hancock

9th Judicial Circuit

Name & Main Office Address: Tye Adair
130 Lafayette, Suite 10
Macomb, IL 61455

Phone: (309) 837-2307
Fax: (309) 833-5570
Email: tadair@9thjudicial.org
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Knox County Juvenile Detention Home - Court Services, 9th Judicial

Name & Main Office Address: Stewart Nyi
1319 E. 5th
Galesburg, IL 61401

Phone: (309) 342-2481
Fax: (309) 343-7922
Email: snyi@9thjudicial.org
Language(s): English
Licenses: IL LCPC-180-001104

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Midwest Counseling

Name & Main Office Address: Bryan Denure
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885
Fax:
Email:
Language(s): English
Licenses: IL LPC #180-005002, CRADC

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Hancock

Midwest Counseling

Name & Main Office Address: Keir L. Goatley
917 Clocktower Dr. #420
Springfield, IL 62704

Phone: (217) 726-8744

Fax:

Email: kgoatley@ameritech.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-#180-004321, (IDPR), CCBT, ATLSA, IL-ATSA

Name & Main Office Address: Gil Pilapil
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885

Fax:

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Hardin

Gary Lemmon and Associates, Inc.

Name & Main Office Address: Gary L. Lemmon
904 E. Main
Norris City, IL 62869

Phone: (618) 378-3010

Fax: (618) 378-2308

Email: glemmon@shawneelink.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-#149-00164, Clinical Member ATSA

Michael E. Althoff, Ph.D.

Name & Main Office Address: Michael E. Althoff, Ph.D.
201 E. Main, Suite 3D
Carbondale, IL 62901

Phone: (618) 549-3587

Fax: (618) 549-2695

Email: mealthoff@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, IL Clinical Member - ATSA

Henderson

9th Judicial Circuit

Name & Main Office Address: Tye Adair
130 Lafayette, Suite 10
Macomb, IL 61455

Phone: (309) 837-2307

Fax: (309) 833-5570

Email: tadair@9thjudicial.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Knox County Juvenile Detention Home - Court Services, 9th Judicial

Name & Main Office Address: Stewart Nyi
1319 E. 5th
Galesburg, IL 61401

Phone: (309) 342-2481

Fax: (309) 343-7922

Email: snyi@9thjudicial.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-001104



Sex Offender Management Board Approved Provider List - By County



Henry

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Michael Albert 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: malbert@abtc-centers Language(s): English Licenses: IL LPC
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Jenny Anderson 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 587-7905 Fax: (847) 487-9360 Email: janderson@abtc-centers.org Language(s): English Licenses: IL LSW
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Jenifer Brickman 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: jbrickman@abtc-centers.org Language(s): English Licenses: IL LCSW-149-010065
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Arturo Gudino, Jr. 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 x226 Fax: (708) 386-8145 Email: agudino@abtc-centers.org Language(s): English , Spanish Licenses: IL LCPC#180-004330
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Michael Igaravidez, Psy.D. 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 386-8145 Email: migaravidez@abtc-centers.org Language(s): English Licenses: IL LCP #071-006172
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Theresa Jackson 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 848-6176 Email: tjackson@abtc-centers.org Language(s): English Licenses: IL LSW-#150-006805
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Dawn Livorsi 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: dlivorsi@abtc-centers.org Language(s): English Licenses: None
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



Henry

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:	Deborah May 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: dmay@abtc-centers.org Language(s): English Licenses: IL LCSW
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Robin McGinnis, MSW 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: rmcginnis@abtc-centers.org Language(s): English Licenses: None
Services Provided:		
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Becky Palmer 715 Lake Street Oak Park, IL 60301	Phone: (708) 386-8145 x23 Fax: (708) 848-6176 Email: bpalmer802@aol.com Language(s): English Licenses: None
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Melissa Pannell 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x145 Fax: (847) 487-9360 Email: mpannell@abtc-centers.org Language(s): English Licenses: IL LPC, ABEL Certified
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Lauren Parks 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x146 Fax: (847) 487-9360 Email: lparks@abtc-centers.org Language(s): English Licenses: None
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Kevin J. Robson 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x165 Fax: (847) 487-9037 Email: krobson@abtc-centers.org Language(s): English Licenses: First Aid, CPR Part I, Surrogate PatientTrainer
Services Provided:		
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Eva San Pedro 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 386-8145 Email: esanpedro@abtc-centers.org Language(s): English , Spanish Licenses: None
Services Provided:		
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications? Yes



Sex Offender Management Board Approved Provider List - By County



Henry

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:	Carolyn Seaman 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x135 Fax: (847) 487-9360 Email: cseaman@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications: Yes
Name & Main Office Address:	Natalie Seel 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: nseel@abtc-centers.org Language(s): English Licenses: LSW
<i>Services Provided:</i>		
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications: Yes
Name & Main Office Address:	Edgar F. Sherk 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: esherk@abtc-centers.org Language(s): English Licenses: IL LCSW #149-002963
<i>Services Provided:</i>		
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications: Yes
Name & Main Office Address:	Susan Urban 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9037 Email: surban@abtc-centers.org Language(s): English Licenses: IL LCSW #149-011169
<i>Services Provided:</i>		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications: Yes
Name & Main Office Address:	Keef Weinstein 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: kweinstein@abtc-centers.org Language(s): English Licenses: IL LPC
<i>Services Provided:</i>		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications: Yes
Name & Main Office Address:	Karen Wolownik, MSW 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: kwolownik@abtc-centers.org Language(s): English Licenses: IL-LCSW #149-010954, CSW (Michigan), Certified Adolescent Sexual Offender Prof.
<i>Services Provided:</i>		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications: Yes

Caparulo and Associates

Name & Main Office Address:	Richard Johnson, MS.Ed., DABFE 1622 38th Street, Suite 108 Rock Island, IL 61201	Phone: (309) 788-6030 Fax: (309) 793-5130 Email: rjohnson@qconline.com Language(s): English Licenses: Board Certified Forensic Examiner, DABFE #13317
<i>Services Provided:</i>		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications: Yes



Sex Offender Management Board Approved Provider List - By County



Henry

Illinois Youth Center (IYC) - Kewanee

Name & Main Office Address:	David Allred (IDOC) 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email:
Services Provided:	Provider Meets the following qualifications:	Language(s): English Licenses: IL LCPC #180-001084
Evaluations ?	Yes	
Treatment ?	Yes	
Adult ?	Yes	
Juvenile ?	Yes	
	All treatment provider qualifications?	Yes
	All evaluation provider qualifications?	No
	All applicant attestation qualifications:	Yes
Name & Main Office Address:	Stacey Andrews 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email:
Services Provided:	Provider Meets the following qualifications:	Language(s): English Licenses: IL LCSW
Evaluations ?	Yes	
Treatment ?	Yes	
Adult ?	Yes	
Juvenile ?	Yes	
	All treatment provider qualifications?	Yes
	All evaluation provider qualifications?	Yes
	All applicant attestation qualifications:	Yes
Name & Main Office Address:	Victor A. Kersey 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email:
Services Provided:	Provider Meets the following qualifications:	Language(s): English Licenses: None
Evaluations ?	Yes	
Treatment ?	Yes	
Adult ?	Yes	
Juvenile ?	Yes	
	All treatment provider qualifications?	Yes
	All evaluation provider qualifications?	Yes
	All applicant attestation qualifications:	Yes
Name & Main Office Address:	Katrina Maddox 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email: psychgirl75@sbcglobal.net
Services Provided:	Provider Meets the following qualifications:	Language(s): English Licenses: IL LPC #178-004175; NCC-National Certified Counselor
Evaluations ?	Yes	
Treatment ?	Yes	
Adult ?	Yes	
Juvenile ?	Yes	
	All treatment provider qualifications?	Yes
	All evaluation provider qualifications?	Yes
	All applicant attestation qualifications:	Yes
Name & Main Office Address:	Robert E. Olt 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email:
Services Provided:	Provider Meets the following qualifications:	Language(s): English Licenses: NCC; LCPC
Evaluations ?	Yes	
Treatment ?	Yes	
Adult ?	Yes	
Juvenile ?	Yes	
	All treatment provider qualifications?	Yes
	All evaluation provider qualifications?	Yes
	All applicant attestation qualifications:	Yes
Name & Main Office Address:	Lisa L. Potter 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email: lpotter9@aol.com
Services Provided:	Provider Meets the following qualifications:	Language(s): English Licenses: MS, MHP
Evaluations ?	Yes	
Treatment ?	Yes	
Adult ?	Yes	
Juvenile ?	Yes	
	All treatment provider qualifications?	Yes
	All evaluation provider qualifications?	Yes
	All applicant attestation qualifications:	Yes
Name & Main Office Address:	Kenneth G. Queen 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email:
Services Provided:	Provider Meets the following qualifications:	Language(s): English Licenses: IL LPC 178-004103
Evaluations ?	Yes	
Treatment ?	Yes	
Adult ?	Yes	
Juvenile ?	Yes	
	All treatment provider qualifications?	Yes
	All evaluation provider qualifications?	Yes
	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Henry

Illinois Youth Center (IYC) - Kewanee

Name & Main Office Address: Petrita Salazar
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Name & Main Office Address: Jeffrey P. L. Sim
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP #071-007028

Lutheran Social Services of Illinois

Name & Main Office Address: Dee Ann Foss
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x271
Fax: (309) 671-0503
Email: deeanne.foss-reimers@lssi.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC

Name & Main Office Address: Yvonne Wojtalik
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x245
Fax: (309) 671-0503
Email: yvonne.wojtalik@lssi.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC

Psychology Associates

Name & Main Office Address: W. David McEchron
4455 E. 56th Street
Davenport, IA 52807

Phone: (563) 355-2577
Fax: (563) 355-4015
Email: mcechronw@genesishhealth.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English , Spanish
Licenses: IL LCP-#071-006817; CPQ #144

Robert Young Center for Community Mental Health

Name & Main Office Address: Lisa Curry
4600 3rd Street
Moline, IL 61265

Phone: (309) 779-2038
Fax: (309) 779-2167
Email: currylctrinityqc.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW-149-005922, LISW-Iowa



Sex Offender Management Board Approved Provider List - By County



Henry

Robert Young Center for Community Mental Health

Name & Main Office Address: Scott Stange
4600 3rd Street
Moline, IL 61265

Phone: (309) 779-2031

Fax: (309) 779-2167

Email: stange@trinityqc.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW, LISW, Clinical Member ATSA

Southpark Psychology at Illini

Name & Main Office Address: James D. Ray
1314 Tenth Street
Silvis, IL 61282

Phone: (309) 792-6563

Fax: (309) 792-6430

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

Iroquois

Community Resource and Counseling Center

Name & Main Office Address: Laurelyn Cropek
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302

Fax: (217) 379-4304

Email: crcc@illicom.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-149-005667

Name & Main Office Address: Laurie A. Gilbert
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302

Fax: (217) 379-4304

Email: lgilbert@4crcc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-149-010484

Name & Main Office Address: Christine Mayer
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302

Fax: (217) 379-4304

Email: ccrc@illicom.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-149.009275

Name & Main Office Address: Jeffrey C. Reynolds
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302

Fax: (217) 379-4304

Email: jreynolds@4crcc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-004199



Sex Offender Management Board Approved Provider List - By County



Iroquois

Dr. James Simone and Associates, LLC

Name & Main Office Address: James Simone
201 Park Place, Suite 2
Bourbannais, IL 60914

Phone: (815) 258-6685

Fax: (815) 468-5463

Email: jimdoc21@hotmail.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-005467

Indian Oaks Academy

Name & Main Office Address: Daphne Bogenscheider
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700

Fax: (815) 468-2310

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: LCPC, EMDR Level I, CANS, CERAP

Name & Main Office Address: Michael Chavers
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3738

Fax: (815) 468-2310

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Name & Main Office Address: Thomas Duff
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700

Fax: (815) 468-2310

Email: dufft@nexus-ioa.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses:

Name & Main Office Address: Andrew Fisher
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700

Fax: (815) 468-2310

Email: fishera@nexus-ioa.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

Name & Main Office Address: Sara E. Langevin, MA
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700

Fax: (815) 468-2310

Email: langevins@nexus-ioa.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses:

Name & Main Office Address: Amber Residori, LCSW
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700

Fax: (815) 468-2310

Email: residori@nexus-ioa.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English, French

Licenses: IL LCSW



Sex Offender Management Board

Approved Provider List - By County



Iroquois

Indian Oaks Academy

Name & Main Office Address: William K. Robison
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3713

Fax: (815) 468-2310

Email: robisonw@Nexus-IOA.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Clinical Psychology #071-006191; IL MFT 166-000144

Onarga Academy

Name & Main Office Address: Rebecca Cunningham
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001

Fax: (815) 268-7977

Email: rcunnin@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-001150

Name & Main Office Address: William D. Featherstone
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001

Fax: (815) 268-7977

Email: bfeathe@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses:

Name & Main Office Address: Douglas C. Gossett, M.A., LCPC
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001

Fax: (815) 268-7977

Email: dgossset@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-005298

Name & Main Office Address: Jamie Kozma
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001

Fax: (815) 268-7977

Email: jkozma@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

Name & Main Office Address: Bill Mitchell
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001

Fax: (815) 268-7977

Email: wmitche@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Name & Main Office Address: Karen Robertie
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001

Fax: (815) 268-7977

Email: krobert@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC 180-005314



Sex Offender Management Board Approved Provider List - By County



Iroquois

Onarga Academy

Name & Main Office Address: Michael D. Simpson
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: msimpso@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC 180-005921

Name & Main Office Address: Tricia Renee St. Pierre
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: tstpier@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: NCC

Name & Main Office Address: Ryan Weidenbenner
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: rweiden@nexus-ong.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC

Name & Main Office Address: Timothy E. White
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: twhite@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Jackson

First Judicial Circuit of Illinois-Probation & Court Services

Name & Main Office Address: Marlynn A. Frailey
201 W. Main
Marion, IL 62959

Phone: (618) 993-1840
Fax: (618) 993-1865
Email: mfrailey@firstcircuitprobation.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: CAC; IAODAPCA #6771

Kosmicki, Ph.D., Frank X.

Name & Main Office Address: Frank X. Kosmicki, Ph.D.
231 W. Main Street
Carbondale, IL 62901

Phone: (618) 203-6730
Fax: (618) 529-3171
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP #071-006668



Sex Offender Management Board Approved Provider List - By County



Jackson

Linda Stover and Associates

Name & Main Office Address: Linda Stover, M.S.Ed, LCPC, CCJS, CSOTS
417 E. Calumet
Centralia, IL 62801

Phone: (618) 322-2811

Fax: (618) 532-6805

Email: lstover@netwitz.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, Certified Criminal Justice Specialist,
ATSA Member, Certified Sex Offender
Treatment Specialist

Michael E. Althoff, Ph.D.

Name & Main Office Address: Michael E. Althoff, Ph.D.
201 E. Main, Suite 3D
Carbondale, IL 62901

Phone: (618) 549-3587

Fax: (618) 549-2695

Email: mealthoff@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, IL Clinical Member - ATSA

Jasper

Effingham County Probation Office

Name & Main Office Address: Sandy Taylor, MS, LCPC
106 N. Third Street
Effingham, IL 62401-3456

Phone: (217) 347-7931

Fax: (217) 347-2001

Email: sandy_taylor9@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-005527

Jasper County Health Department

Name & Main Office Address: Debra Reed, M.S., QMHP
106 E. Edwards
Newton, IL 62448

Phone: (618) 783-4154

Fax: (618) 783-2339

Email: dreed@jasperhealth.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Jefferson

Alternatives Counseling, Inc.

Name & Main Office Address: Donya Adkerson, MA
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085

Fax: (618) 288-8959

Email: donya2@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-000271

Name & Main Office Address: Bethany A. Munge, M.A., Q.M.H.P.
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085 x202

Fax: (618) 288-8959

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None



Sex Offender Management Board Approved Provider List - By County



Jefferson

Gary Lemmon and Associates, Inc.

Name & Main Office Address: Gary L. Lemmon
904 E. Main
Norris City, IL 62869

Phone: (618) 378-3010
Fax: (618) 378-2308
Email: glemmon@shawneelink.net
Language(s): English
Licenses: IL LCSW-#149-00164, Clinical Member ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Jefferson County Comprehensive Services

Name & Main Office Address: Linda Stover, M.S.Ed, LCPC, CCJS, CSOTS
P.O. Box 428
Mount Vernon, IL 62864

Phone: (618) 322-2811
Fax: (618) 532-6805
Email: lstover@netwitz.net
Language(s): English
Licenses: IL LCPC, Certified Criminal Justice Specialist, ATSA Member, Certified Sex Offender Treatment Specialist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Linda Stover and Associates

Name & Main Office Address: Linda Stover, M.S.Ed, LCPC, CCJS, CSOTS
417 E. Calumet
Centralia, IL 62801

Phone: (618) 322-2811
Fax: (618) 532-6805
Email: lstover@netwitz.net
Language(s): English
Licenses: IL LCPC, Certified Criminal Justice Specialist, ATSA Member, Certified Sex Offender Treatment Specialist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Stanislaus, MD, Angeline

Name & Main Office Address: Angeline Stanislaus, M.D.
621 S. New Ballas Road, Suite 268A
St. Louis, MO 63141

Phone: (618) 791-1777
Fax:
Email:
Language(s): English
Licenses: IL Medical License #036-102686 ; Certification in Forensic Psychiatry

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Jersey

Alternatives Counseling, Inc.

Name & Main Office Address: Donya Adkerson, MA
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085
Fax: (618) 288-8959
Email: donya2@aol.com
Language(s): English
Licenses: IL LCPC-180-000271

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Bethany A. Munge, M.A., Q.M.H.P.
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085 x202
Fax: (618) 288-8959
Email:
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



JoDavieess

Family Services Agency of DeKalb County, Inc.

Name & Main Office Address: Kathleen M. Alberts, MSW, LCPC
14 Health Services Drive
DeKalb, IL 60115

Phone: (815) 758-8618

Fax: (815) 758-7569

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-004462; Certified Sex Offender
Tx Specialist

Family, Divorce & Mediation of Ogle County

Name & Main Office Address: Kathleen M. Alberts, MSW, LCPC
1500 West Lincoln Avenue
Rochelle, IL 61068

Phone: (815) 562-8818

Fax: (815) 562-8818

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-004462; Certified Sex Offender
Tx Specialist

Jeffrey B. Sundberg

Name & Main Office Address: Jeffrey B. Sundberg
P. O. Box 17044, 610 A East State Street
Rockford, IL 61110

Phone: (815) 332-8342

Fax: (815) 332-8342

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-003876, ACSW, ATSA Member

Welch, Psy.D., William H.

Name & Main Office Address: William H. Welch, Psy.D.
810 E. State Street, Suite 304
Rockford, IL 61104

Phone: (815) 316-7604

Fax: (815) 316-7614

Email: neuropsychd@gmail.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, ATSA Clinical Member, IL ATSA,
CSOTS

Winston J. Hopkins

Name & Main Office Address: Winston J. Hopkins
404 Midland Lane
Monona, WI 53716

Phone: (608) 221-2586

Fax:

Email: winstonkarelyn@charter.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: WI LPC 2503-125; Lic. Advanced Practice
Social Worker

Johnson

First Judicial Circuit of Illinois-Probation & Court Services

Name & Main Office Address: Marlynn A. Frailey
201 W. Main
Marion, IL 62959

Phone: (618) 993-1840

Fax: (618) 993-1865

Email: mfrailey@firstcircuitprobation.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: CAC; IAODAPCA #6771



Sex Offender Management Board Approved Provider List - By County



Johnson

Gary Lemmon and Associates, Inc.

Name & Main Office Address: Gary L. Lemmon
904 E. Main
Norris City, IL 62869

Phone: (618) 378-3010

Fax: (618) 378-2308

Email: glemmon@shawneelink.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-#149-00164, Clinical Member ATSA

Massac County Mental Health

Name & Main Office Address: Patricia Gillespie
206 W. 5th Street
Metropolis, IL 62960

Phone: (618) 524-9368

Fax: (618) 524-9551

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: Sexual Abuse Treatment Counselor, BS, MHP,
17 yrs experience

Name & Main Office Address: Yvonne J. Rath
206 W. 5th Street
Metropolis, IL 62960

Phone: (618) 524-9368

Fax: (618) 524-9551

Email: mcmh@hcis.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, NCC, MAC, CCJS, PCGC, CARF,
Medicaid, Child Welfare, Substance Abuse -
Agency, Individual

Michael E. Althoff, Ph.D.

Name & Main Office Address: Michael E. Althoff, Ph.D.
201 E. Main, Suite 3D
Carbondale, IL 62901

Phone: (618) 549-3587

Fax: (618) 549-2695

Email: mealthoff@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, IL Clinical Member - ATSA

Kane

Affiliated Psychologists, LTD

Name & Main Office Address: Patrick Hoatlin, LCSW
4801 W. Peterson Avenue, Suite 525
Chicago, IL 60646

Phone: (773) 286-3100

Fax: (773) 777-7543

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-011120

Name & Main Office Address: Barry M. Leavitt, Psy.D.
4801 W. Peterson Avenue, Suite 525
Chicago, IL 60646

Phone: (773) 286-3100

Fax: (773) 777-7543

Email: ckopeny@ap-ltd.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, Hare Psychopathy Checklist (PCL-R)
Certification



Sex Offender Management Board Approved Provider List - By County



Kane

Affiliated Psychologists, LTD

Name & Main Office Address:	Ray Quackenbush 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (773) 286-3100 Fax: (773) 777-7543 Email: quaq@earthlink.net
Services Provided:	Provider Meets the following qualifications:	Language(s): English Licenses: IL Psychology License #091-006293, Clinical Member ATSA
Evaluations ?	Yes	
Treatment ?	Yes	
Adult ?	Yes	
Juvenile ?	Yes	
Name & Main Office Address:	Phil Reidda, Ph.D. 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (773) 286-3100 Fax: (773) 777-7543 Email: ckopeny@ap-ltd.com
Services Provided:	Provider Meets the following qualifications:	Language(s): English Licenses: IL LCP, Hare Psychopathy Checklist (PCL-R) Certification, Diplomat American Board Professional Psychologists
Evaluations ?	Yes	
Treatment ?	Yes	
Adult ?	Yes	
Juvenile ?	Yes	
Name & Main Office Address:	Laura T. Schultz, Psy.D. 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (773) 286-3100 Fax: (773) 777-7543 Email:
Services Provided:	Provider Meets the following qualifications:	Language(s): English Licenses: IL LCP
Evaluations ?	Yes	
Treatment ?	Yes	
Adult ?	Yes	
Juvenile ?	Yes	
Name & Main Office Address:	Pamela C. Van Wyk 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (765) 721-7863 Fax: (773) 777-7543 Email: pcvw811@illicom.net
Services Provided:	Provider Meets the following qualifications:	Language(s): English Licenses: IL-LCPC, IN-LMHC, AL-LMFT, ATSA Clinical Member
Evaluations ?	Yes	
Treatment ?	No	
Adult ?	No	
Juvenile ?	No	

Allied Counseling

Name & Main Office Address:	Gerard J. Girdaukas, Ph.D. 49 Sherwood Terrace Lake Bluff, IL 60044	Phone: (847) 615-1425 Fax: (847) 615-1409 Email:
Services Provided:	Provider Meets the following qualifications:	Language(s): English Licenses: IL LCP , Ph.D.
Evaluations ?	Yes	
Treatment ?	No	
Adult ?	Yes	
Juvenile ?	Yes	

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:	Michael Albert 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: malbert@abtc-centers
Services Provided:	Provider Meets the following qualifications:	Language(s): English Licenses: IL LPC
Evaluations ?	Yes	
Treatment ?	Yes	
Adult ?	No	
Juvenile ?	Yes	
Name & Main Office Address:	Jenny Anderson 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 587-7905 Fax: (847) 487-9360 Email: janderson@abtc-centers.org
Services Provided:	Provider Meets the following qualifications:	Language(s): English Licenses: IL LSW
Evaluations ?	No	
Treatment ?	Yes	
Adult ?	Yes	
Juvenile ?	Yes	



Sex Offender Management Board Approved Provider List - By County



Kane

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Jenifer Brickman 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: jbrickman@abtc-centers.org Language(s): English Licenses: IL LCSW-149-010065
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Arturo Gudino, Jr. 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 x226 Fax: (708) 386-8145 Email: agudino@abtc-centers.org Language(s): English , Spanish Licenses: IL LCPC#180-004330
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Michael Igaravidez, Psy.D. 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 386-8145 Email: migaravidez@abtc-centers.org Language(s): English Licenses: IL LCP #071-006172
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Theresa Jackson 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 848-6176 Email: tjackson@abtc-centers.org Language(s): English Licenses: IL LSW-#150-006805
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Dawn Livorsi 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: dlivorsi@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Deborah May 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: dmay@abtc-centers.org Language(s): English Licenses: IL LCSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Robin McGinnis, MSW 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: rmcginnis@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



Kane

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Becky Palmer 715 Lake Street Oak Park, IL 60301	Phone: (708) 386-8145 x23 Fax: (708) 848-6176 Email: bpalmer802@aol.com Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications?	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Melissa Pannell 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x145 Fax: (847) 487-9360 Email: mpannell@abtc-centers.org Language(s): English Licenses: IL LPC, ABEL Certified
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications?	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Lauren Parks 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x146 Fax: (847) 487-9360 Email: lparks@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications?	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Kevin J. Robson 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x165 Fax: (847) 487-9037 Email: krobson@abtc-centers.org Language(s): English Licenses: First Aid, CPR Part I, Surrogate Patient Trainer
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications?	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Eva San Pedro 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 386-8145 Email: esanpedro@abtc-centers.org Language(s): English , Spanish Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications?	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Carolyn Seaman 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x135 Fax: (847) 487-9360 Email: cseaman@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications?	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Natalie Seel 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: nseel@abtc-centers.org Language(s): English Licenses: LSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications?	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



Kane

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address: Edgar F. Sherk
27255 N. Fairfield Road
Mundelein, IL 60060

Phone: (847) 487-9455
Fax: (847) 487-9360
Email: esherk@abtc-centers.org
Language(s): English
Licenses: IL LCSW #149-002963

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Susan Urban
27255 N. Fairfield Road
Mundelein, IL 60060

Phone: (847) 487-9455
Fax: (847) 487-9037
Email: surban@abtc-centers.org
Language(s): English
Licenses: IL LCSW #149-011169

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Keef Weinstein
27255 N. Fairfield Road
Mundelein, IL 60060

Phone: (847) 487-9455
Fax: (847) 487-9360
Email: kweinstein@abtc-centers.org
Language(s): English
Licenses: IL LPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Karen Wolownik, MSW
27255 N. Fairfield Road
Mundelein, IL 60060

Phone: (847) 487-9455
Fax: (847) 487-9360
Email: kwolownik@abtc-centers.org
Language(s): English
Licenses: IL-LCSW #149-010954, CSW (Michigan),
Certified Adolescent Sexual Offender Prof.

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Centegral HealthSystem/Horizons

Name & Main Office Address: Robert Meyer
527 W. South Street
Woodstock, IL 60098

Phone: (815) 338-9199
Fax: (815) 338-9205
Email: rmeyer3@charter.net
Language(s): English
Licenses: Ph.D., LCP, Fellow Academy of Forensic
Psychologist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Chuck Lederman, LCSW

Name & Main Office Address: Chuck Lederman, LCSW
68 Main Street, P. O. Box 95
Oswego, IL 60543

Phone: (630) 269-3146
Fax: (630) 551-0988
Email: chuck60543@aol.com
Language(s): English
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Kane

Community Counseling Center, Ltd.

Name & Main Office Address: Jeffrey A. Martin
666 Russell Court, Suite 105
Woodstock, IL 60098

Phone: (815) 338-7749

Fax: (815) 338-7728

Email: ccc@imaxx.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW 149-003373

Family, Divorce & Mediation of Ogle County

Name & Main Office Address: Kathleen M. Alberts, MSW, LCPC
1500 West Lincoln Avenue
Rochelle, IL 61068

Phone: (815) 562-8818

Fax: (815) 562-8818

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-004462; Certified Sex Offender
Tx Specialist

Forensic Psych Associates, Ltd.

Name & Main Office Address: Robert H. Gordon, Ph.D.
203 N. LaSalle Street, #2100
Chicago, IL 60601

Phone: (312) 917-1610

Fax: (608) 756-5174

Email: rgordon@forensicpsych.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP

Forensic Psychology Associates

Name & Main Office Address: Mark Brenzinger, PsyD
445 E. Ohio, Suite 450
Chicago, IL 60611

Phone: (312) 740-9691

Fax: (312) 527-9088

Email: ciba9@worldnet.att.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Name & Main Office Address: Eric Ostrov, J.D., Ph.D., ABPP
445 E. Ohio, Suite 450
Chicago, IL 60611

Phone: (312) 740-9691

Fax: (312) 527-9088

Email: eostrov@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Psy.D. 071-001951, IL Attorney #3128938

Name & Main Office Address: Susan Page, Psy.D.
445 E. Ohio, Suite 450
Chicago, IL 60611

Phone: (312) 399-3140

Fax: (312) 527-9088

Email: slpage27@aol.com

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None



Sex Offender Management Board Approved Provider List - By County



Kane

FTP - Administration

Name & Main Office Address: Ray S. Kim, Ph.D.
750 S. State Street
Elgin, IL 60123

Phone: (847) 742-1040 x3360

Fax: (847) 429-4946

Email: dhs5998@dhs.state.il.us

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP-#071-005373

Glenwood Testing Center

Name & Main Office Address: Frank E. Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-8133

Fax: (815) 968-4656

Email: fec@juno.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-002590

Name & Main Office Address: Kyle Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-5342

Fax: (815) 968-4656

Email: drcushing@juno.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, Consulting Forensic Examiner

Kane County Diagnostic Center

Name & Main Office Address: Timothy Brown, Psy.D.
757 E. Fabyan Parkway
Batavia, IL 60510

Phone: (630) 262-4480

Fax: (630) 262-4484

Email: browntimothy@co.kane.il.us

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-003827

Name & Main Office Address: Lesley Kane, Psy.D.
757 E. Fabyan Parkway
Batavia, IL 60510

Phone: (630) 262-4480

Fax: (630) 262-4484

Email: kanelesley@co.kane.il.us

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP-#071-006757

Name & Main Office Address: Mark J. Kuzia, Psy.D.
757 E. Fabyan Parkway
Batavia, IL 60510

Phone: (630) 262-4480

Fax: (630) 262-4484

Email: mjkuzia@netzero.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Name & Main Office Address: Amanda Rosenkoetter
757 E. Fabyan Parkway
Batavia, IL 60510

Phone: (630) 262-4480

Fax: (630) 262-4484

Email: ajrosenkoetter@comcast.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP



Sex Offender Management Board Approved Provider List - By County



Kane

Kane County Diagnostic Center

Name & Main Office Address: Alexandra Tsang, Psy.D.
757 E. Fabyan Parkway
Batavia, IL 60510

Phone: (630) 444-1081
Fax: (630) 262-4484
Email: tsangalexandra@co.kane.il.us
Language(s): English , Polish
Licenses: IL LCP

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Kids Hope United

Name & Main Office Address: Kristan Cameron
215 N. Milwaukee Avenue
Lake Villa, IL 60046

Phone: (847) 245-6570
Fax: (847) 245-6714
Email: kcameron@kidshopeunited.org
Language(s): English
Licenses: IL LCPC 180-002580

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Shenandoah Cardwell
215 N. Milwaukee Avenue
Lake Villa, IL 60046

Phone: (847) 245-6544
Fax: (847) 245-6714
Email: scardwell.LCPC@comcast.net
Language(s): English
Licenses: IL LCPC #180-001256, WI LPC #2906-125, NCC #22818

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Denny Clouse, MSW, LCSW
1750 E. Main Street, Suite 40
St. Charles, IL 60174

Phone: (847) 741-7140
Fax: (847) 741-2089
Email: dclouse@kidshopeunited.org
Language(s): English
Licenses: IL LCSW #149-005893, Clinical ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Thomas F. Hayes
1750 East Main Street, Suite 40
St. Charles, IL 60174

Phone: (630) 513-6277 x22
Fax: (630) 513-4277
Email: thayes@kidshopeunited.org
Language(s): English
Licenses: IL LPC #178-003268

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Dennis Kyrouac
1750 E. Main Street, Suite 40
St. Charles, IL 60174

Phone: (847) 741-7140
Fax: (847) 741-2089
Email: dkyrouac@msn.com
Language(s): English
Licenses: IAODAPCA Counselor, CADC

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Liza Simon-Roper
215 N. Milwaukee Avenue
Lake Villa, IL 60046

Phone: (847) 245-6547
Fax: (847) 245-6714
Email: lsroper@kidshopeunited.org
Language(s): English
Licenses: IL LCSW, WI LCSW, ATSA Member

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Kane

Latino Family Services, P.C.

Name & Main Office Address: Arturo Hurtado, LCSW, ACSW
825 E. Golf Road, Suite 1133
Arlington Heights, IL 60005-5200

Phone: (847) 593-7077

Fax: (847) 593-7056

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English , Spanish

Licenses: IL LCSW-#149-005124, ACSW, ATSA Clinical Member

Laurie L. Riehm, LCSW

Name & Main Office Address: Laurie L. Riehm, LCSW
P.O. Box 1224
St. Charles, IL 60174

Phone: (630) 587-5631

Fax: (630) 587-5631

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW, American College of Forensic Examiners-Certified Clinical Criminal Justice Specialist

Marcy Pritzen, LCSW

Name & Main Office Address: Marcy Pritzen, LCSW
3295 N. Arlington Heights Rd, Suite 103
Arlington Heights, IL 60004

Phone: (847) 636-6364

Fax: (847) 398-6595

Email: mpritzen@mindspring.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-005331

Michael R. Davison

Name & Main Office Address: Michael R. Davison
3295 N. Arlington Heights Road, Suite 103
Arlington Heights, IL 60004

Phone: (847) 788-0645

Fax: (847) 398-6595

Email: apsychdoc@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071005-382

Nicholas F. O'Riordan, Ph.D.

Name & Main Office Address: #Error

Phone: (815) 241-4575

Fax:

Email: droriordan@sbcglobal.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-3652

Nickerson and Associates

Name & Main Office Address: Jerry Lowell
P.O. Box 239 (also office in Chicago)
Winfield, IL 60190

Phone: (630) 707-7380

Fax: (630) 839-5068

Email: jlowellLCSW@msn.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-003408



Sex Offender Management Board Approved Provider List - By County



Kane

Nickerson and Associates

Name & Main Office Address: Debra Nickerson, Psy.D.
P.O. Box 239 (also office in Chicago)
Winfield, IL 60190

Phone: (630) 752-9725

Fax: (630) 752-9726

Email: tnick@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP # 071-006020

Northwest Treatment Associates

Name & Main Office Address: Carol Fetzner
645 McHenry Avenue
Woodstock, IL 60098

Phone: (815) 337-1234

Fax: (815) 337-5653

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-000371, NCC 27767

Name & Main Office Address: Patrick C. Littlejohn, MA, NCC, LCPC
645 McHenry Avenue
Woodstock, IL 60098

Phone: (815) 337-1234

Fax: (847) 608-8570

Email: pclittlejohn@hotmail.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, National Certified Counselor, Clinical Member-ATSA

Name & Main Office Address: Bonnie E. Marable
645 McHenry Avenue
Woodstock, IL 60098

Phone: (815) 337-1234

Fax: (847) 608-8572

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-006480; IN Psychologist

Name & Main Office Address: Cheryl R. Runion
1185 Dundee Avenue, E-1
Elgin, IL 60120

Phone: (847) 608-8570

Fax: (847) 608-8576

Email: j.runion@comcast.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, CADC, CCJP, NCC

Name & Main Office Address: Dr. Jim Webster, PsyD
1185 Dundee Avenue, E-1
Elgin, IL 60120

Phone: (815) 337-1234

Fax: (815) 337-5653

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

RITAS Ministry

Name & Main Office Address: Judith "Jude" C. Skallerup
325 E. Galena
Aurora, IL 60505

Phone: (630) 966-0252

Fax: (630) 966-0005

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-004615, CSOTS



Sex Offender Management Board Approved Provider List - By County



Kane

William "Kip" Hillman, Psy.D.

Name & Main Office Address: William "Kip" Hillman, Psy.D.
4064 N. Lincoln, #290
Chicago, IL 60618

Phone: (312) 933-0060
Fax: (773) 989-0275
Email: kiphillman@yahoo.com
Language(s): English
Licenses: IL Psychology 071-003686

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Kankakee

Bohlen & Associates, SC

Name & Main Office Address: Joseph G. Bohlen, MD, Ph.D.
3001 Spring Mill Drive, Suite D
Springfield, IL 62704

Phone: (217) 546-3100
Fax: (217) 546-3284
Email:
Language(s): English
Licenses: IL Physicians & Surgeons

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Crossroads Counseling Center

Name & Main Office Address: Eric Cumming
197 W. Harrison
Bourbannais, IL 60914

Phone: (815) 802-0479
Fax:
Email:
Language(s): English
Licenses: LPC #178-002019

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Dr. James Simone and Associates, LLC

Name & Main Office Address: James Simone
201 Park Place, Suite 2
Bourbannais, IL 60914

Phone: (815) 258-6685
Fax: (815) 468-5463
Email: jimdoc21@hotmail.com
Language(s): English
Licenses: IL LCP #071-005467

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Indian Oaks Academy

Name & Main Office Address: Daphne Bogenscheider
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700
Fax: (815) 468-2310
Email:
Language(s): English
Licenses: LCPC, EMDR Level I, CANS, CERAP

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Michael Chavers
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3738
Fax: (815) 468-2310
Email:
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Kankakee

Indian Oaks Academy

Name & Main Office Address: Thomas Duff
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700
Fax: (815) 468-2310
Email: dufft@nexus-ioa.org
Language(s): English
Licenses:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Andrew Fisher
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700
Fax: (815) 468-2310
Email: fishera@nexus-ioa.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Sara E. Langevin, MA
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700
Fax: (815) 468-2310
Email: langevins@nexus-ioa.org
Language(s): English
Licenses:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Amber Residori, LCSW
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700
Fax: (815) 468-2310
Email: residori@nexus-ioa.org
Language(s): English , French
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: William K. Robison
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3713
Fax: (815) 468-2310
Email: robisonw@Nexus-IOA.org
Language(s): English
Licenses: IL Clinical Psychology #071-006191; IL MFT 166-000144

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

James Simone & Associates-Kankakee SD#111

Name & Main Office Address: Brian C. Malliett
240 Warren Avenue
Kankakee, IL 60901

Phone: (815) 474-9550
Fax:
Email: bcmalliett@comcast.net
Language(s): English
Licenses: Adolescent Sex Offender Counselor; Type 73 School Psychologist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Brian C. Malliett
201 Park Place
Bourbannais, IL 60914

Phone: (815) 474-9550
Fax:
Email: bcmalliett@comcast.net
Language(s): English
Licenses: Adolescent Sex Offender Counselor; Type 73 School Psychologist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Kankakee

Nicholas F. O'Riordan, Ph.D.

Name & Main Office Address: #Error

Phone: (815) 241-4575

Fax:

Email: droriordan@sbcglobal.net

Language(s): English

Licenses: IL LCP #071-3652

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Onarga Academy

Name & Main Office Address: Rebecca Cunningham
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001

Fax: (815) 268-7977

Email: rcunnin@nexus-ona.org

Language(s): English

Licenses: IL LCPC #180-001150

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: William D. Featherstone
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001

Fax: (815) 268-7977

Email: bfeathe@nexus-ona.org

Language(s): English

Licenses:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Douglas C. Gossett, M.A., LCPC
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001

Fax: (815) 268-7977

Email: dgossset@nexus-ona.org

Language(s): English

Licenses: IL LCPC #180-005298

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Jamie Kozma
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001

Fax: (815) 268-7977

Email: jkozma@nexus-ona.org

Language(s): English

Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Bill Mitchell
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001

Fax: (815) 268-7977

Email: wmitche@nexus-ona.org

Language(s): English

Licenses: None

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Karen Robertie
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001

Fax: (815) 268-7977

Email: krobert@nexus-ona.org

Language(s): English

Licenses: IL LCPC 180-005314

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Kankakee

Onarga Academy

Name & Main Office Address: Michael D. Simpson
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: msimpso@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC 180-005921

Name & Main Office Address: Tricia Renee St. Pierre
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: tstpier@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: NCC

Name & Main Office Address: Ryan Weidenbenner
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: rweiden@nexus-ong.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC

Name & Main Office Address: Timothy E. White
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: twhite@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

William "Kip" Hillman, Psy.D.

Name & Main Office Address: William "Kip" Hillman, Psy.D.
4064 N. Lincoln, #290
Chicago, IL 60618

Phone: (312) 933-0060
Fax: (773) 989-0275
Email: kiphillman@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL Psychology 071-003686

Kendall

Chuck Lederman, LCSW

Name & Main Office Address: Chuck Lederman, LCSW
68 Main Street, P. O. Box 95
Oswego, IL 60543

Phone: (630) 269-3146
Fax: (630) 551-0988
Email: chuck60543@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW



Sex Offender Management Board Approved Provider List - By County



Kendall

Glenwood Testing Center

Name & Main Office Address: Frank E. Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-8133

Fax: (815) 968-4656

Email: fec@juno.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-002590

Name & Main Office Address: Kyle Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-5342

Fax: (815) 968-4656

Email: drcushing@juno.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, Consulting Forensic Examiner

Kane County Diagnostic Center

Name & Main Office Address: Timothy Brown, Psy.D.
757 E. Fabyan Parkway
Batavia, IL 60510

Phone: (630) 262-4480

Fax: (630) 262-4484

Email: browntimothy@co.kane.il.us

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-003827

Name & Main Office Address: Lesley Kane, Psy.D.
757 E. Fabyan Parkway
Batavia, IL 60510

Phone: (630) 262-4480

Fax: (630) 262-4484

Email: kanelesley@co.kane.il.us

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP-#071-006757

Name & Main Office Address: Mark J. Kuzia, Psy.D.
757 E. Fabyan Parkway
Batavia, IL 60510

Phone: (630) 262-4480

Fax: (630) 262-4484

Email: mjkuzia@netzero.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Name & Main Office Address: Amanda Rosenkoetter
757 E. Fabyan Parkway
Batavia, IL 60510

Phone: (630) 262-4480

Fax: (630) 262-4484

Email: ajrosenkoetter@comcast.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP

Name & Main Office Address: Alexandra Tsang, Psy.D.
757 E. Fabyan Parkway
Batavia, IL 60510

Phone: (630) 444-1081

Fax: (630) 262-4484

Email: tsangalexandra@co.kane.il.us

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English , Polish

Licenses: IL LCP



Sex Offender Management Board Approved Provider List - By County



Kendall

Kids Hope United

Name & Main Office Address:	Kristan Cameron 215 N. Milwaukee Avenue Lake Villa, IL 60046	Phone: (847) 245-6570 Fax: (847) 245-6714 Email: kcameron@kidshopeunited.org Language(s): English Licenses: IL LCPC 180-002580
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? Yes
Adult ?	No	All applicant attestation qualifications? Yes
Juvenile ?	Yes	
Name & Main Office Address:	Shenandoah Cardwell 215 N. Milwaukee Avenue Lake Villa, IL 60046	Phone: (847) 245-6544 Fax: (847) 245-6714 Email: scardwell.LCPC@comcast.net Language(s): English Licenses: IL LCPC #180-001256, WI LPC #2906-125, NCC #22818
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? Yes
Adult ?	Yes	All applicant attestation qualifications? Yes
Juvenile ?	Yes	
Name & Main Office Address:	Denny Clouse, MSW, LCSW 1750 E. Main Street, Suite 40 St. Charles, IL 60174	Phone: (847) 741-7140 Fax: (847) 741-2089 Email: dclouse@kidshopeunited.org Language(s): English Licenses: IL LCSW #149-005893, Clinical ATSA
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? Yes
Adult ?	Yes	All applicant attestation qualifications? Yes
Juvenile ?	Yes	
Name & Main Office Address:	Dennis Kyrouac 1750 E. Main Street, Suite 40 St. Charles, IL 60174	Phone: (847) 741-7140 Fax: (847) 741-2089 Email: dkyrouac@msn.com Language(s): English Licenses: IAODAPCA Counselor, CADC
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? No
Adult ?	Yes	All applicant attestation qualifications? Yes
Juvenile ?	Yes	
Name & Main Office Address:	Liza Simon-Roper 215 N. Milwaukee Avenue Lake Villa, IL 60046	Phone: (847) 245-6547 Fax: (847) 245-6714 Email: lsroper@kidshopeunited.org Language(s): English Licenses: IL LCSW, WI LCSW, ATSA Member
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? Yes
Adult ?	Yes	All applicant attestation qualifications? Yes
Juvenile ?	Yes	

Nicholas F. O'Riordan, Ph.D.

Name & Main Office Address:	#Error	Phone: (815) 241-4575 Fax: Email: droriordan@sbcglobal.net Language(s): English Licenses: IL LCP #071-3652
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? Yes
Adult ?	Yes	All applicant attestation qualifications? Yes
Juvenile ?	Yes	

RITAS Ministry

Name & Main Office Address:	Judith "Jude" C. Skallerup 325 E. Galena Aurora, IL 60505	Phone: (630) 966-0252 Fax: (630) 966-0005 Email: Language(s): English Licenses: IL LCPC-180-004615, CSOTS
Services Provided:	Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications? Yes
Treatment ?	Yes	All evaluation provider qualifications? Yes
Adult ?	Yes	All applicant attestation qualifications? Yes
Juvenile ?	Yes	



Sex Offender Management Board Approved Provider List - By County



Knox

9th Judicial Circuit

Name & Main Office Address: Tye Adair
130 Lafayette, Suite 10
Macomb, IL 61455

Phone: (309) 837-2307
Fax: (309) 833-5570
Email: tadair@9thjudicial.org
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Advanced Behavioral Health

Name & Main Office Address: W. Christopher Tolen, Psy.D.
2101 Windish Drive, Suite 100
Galesburg, IL 61401

Phone: (309) 342-6852
Fax: (309) 344-0071
Email: drtolen@byu.net
Language(s): English
Licenses: IL LCP #071-006296

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Knox County Juvenile Detention Home - Court Services, 9th Judicial

Name & Main Office Address: Stewart Nyi
1319 E. 5th
Galesburg, IL 61401

Phone: (309) 342-2481
Fax: (309) 343-7922
Email: snyi@9thjudicial.org
Language(s): English
Licenses: IL LCPC-180-001104

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Lutheran Social Services of Illinois

Name & Main Office Address: Dee Ann Foss
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x271
Fax: (309) 671-0503
Email: deeanne.foss-reimers@lssi.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Yvonne Wojtalik
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x245
Fax: (309) 671-0503
Email: yvonne.wojtalik@lssi.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Midwest Counseling

Name & Main Office Address: Bryan Denure
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885
Fax:
Email:
Language(s): English
Licenses: IL LPC #180-005002, CRADC

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Knox

Midwest Counseling

Name & Main Office Address: Keir L. Goatley
917 Clocktower Dr. #420
Springfield, IL 62704

Phone: (217) 726-8744

Fax:

Email: kgoatley@ameritech.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-#180-004321, (IDPR), CCBT, ATLSA, IL-ATSA

Name & Main Office Address: Gil Pilapil
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885

Fax:

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

P. F. Dover Counseling, LLC

Name & Main Office Address: James R. Seavey
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 495-4924

Fax: (309) 495-4993

Email: jspfdovercounseling@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-001434

Name & Main Office Address: Scott A. Smith
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 477-2278

Fax: (309) 477-3113

Email: sspfdovercounseling@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

Southpark Psychology at Illini

Name & Main Office Address: James D. Ray
1314 Tenth Street
Silvis, IL 61282

Phone: (309) 792-6563

Fax: (309) 792-6430

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

Lake

19th Judicial Circuit Court

Name & Main Office Address: Karen L. Chantry, Psy.D.
15 S. County Street
Waukegan, IL 60085

Phone: (847) 377-3681

Fax: (847) 625-5109

Email: kchantry@co.lake.il.us

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-5475, KS LP-0871, IN 20040979, MN LP-3705



Sex Offender Management Board Approved Provider List - By County



Lake

Adelante, P.C.

Name & Main Office Address: Eileen Arzani
1608 N. Milwaukee, Suite 407
Chicago, IL 60647

Phone: (773) 486-0031

Fax: (773) 486-1891

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English , Spanish

Licenses: IL LCSW

Name & Main Office Address: Evaristo Ruiz
1608 N. Milwaukee, Suite 407
Chicago, IL 60647

Phone: (773) 486-0031

Fax: (773) 486-1891

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English , Italian , Spanish

Licenses: IL LCSW

Name & Main Office Address: Karen Stanbary
1608 N. Milwaukee, Suite 407
Chicago, IL 60647

Phone: (773) 486-0031

Fax: (773) 486-1891

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English , Spanish

Licenses: IL LCSW

Affiliated Psychologists, LTD

Name & Main Office Address: Patrick Hoatlin, LCSW
4801 W. Peterson Avenue, Suite 525
Chicago, IL 60646

Phone: (773) 286-3100

Fax: (773) 777-7543

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-011120

Name & Main Office Address: Barry M. Leavitt, Psy.D.
4801 W. Peterson Avenue, Suite 525
Chicago, IL 60646

Phone: (773) 286-3100

Fax: (773) 777-7543

Email: ckopeny@ap-ltd.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, Hare Psychopathy Checklist (PCL-R) Certification

Name & Main Office Address: Ray Quackenbush
4801 W. Peterson Avenue, Suite 525
Chicago, IL 60646

Phone: (773) 286-3100

Fax: (773) 777-7543

Email: quaq@earthlink.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Psychology License #091-006293, Clinical Member ATSA

Name & Main Office Address: Phil Reidda, Ph.D.
4801 W. Peterson Avenue, Suite 525
Chicago, IL 60646

Phone: (773) 286-3100

Fax: (773) 777-7543

Email: ckopeny@ap-ltd.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, Hare Psychopathy Checklist (PCL-R) Certification, Diplomat American Board Professional Psychologists



Sex Offender Management Board Approved Provider List - By County



Lake

Affiliated Psychologists, LTD

Name & Main Office Address: Laura T. Schultz, Psy.D.
4801 W. Peterson Avenue, Suite 525
Chicago, IL 60646

Phone: (773) 286-3100

Fax: (773) 777-7543

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP

Name & Main Office Address: Pamela C. Van Wyk
4801 W. Peterson Avenue, Suite 525
Chicago, IL 60646

Phone: (765) 721-7863

Fax: (773) 777-7543

Email: pcvw811@illicom.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL-LCPC, IN-LMHC, AL-LMFT, ATSA Clinical Member

Allied Counseling

Name & Main Office Address: Gerard J. Girdaukas, Ph.D.
49 Sherwood Terrace
Lake Bluff, IL 60044

Phone: (847) 615-1425

Fax: (847) 615-1409

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP , Ph.D.

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address: Michael Albert
27255 N. Fairfield Road
Mundelein, IL 60060

Phone: (847) 487-9455

Fax: (847) 487-9360

Email: malbert@abtc-centers

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LPC

Name & Main Office Address: Jenny Anderson
27255 N. Fairfield Road
Mundelein, IL 60060

Phone: (847) 587-7905

Fax: (847) 487-9360

Email: janderson@abtc-centers.org

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LSW

Name & Main Office Address: Jenifer Brickman
27255 N. Fairfield Road
Mundelein, IL 60060

Phone: (847) 487-9455

Fax: (847) 487-9360

Email: jbrickman@abtc-centers.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-149-010065

Name & Main Office Address: Arturo Gudino, Jr.
715 Lake Street
Oak Park, IL 60301

Phone: (847) 487-9455 x226

Fax: (708) 386-8145

Email: agudino@abtc-centers.org

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English , Spanish

Licenses: IL LCPC#180-004330



Sex Offender Management Board Approved Provider List - By County



Lake

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Michael Igaravidez, Psy.D. 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 386-8145 Email: migaravidez@abtc-centers.org Language(s): English Licenses: IL LCP #071-006172
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Theresa Jackson 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 848-6176 Email: tjackson@abtc-centers.org Language(s): English Licenses: IL LSW-#150-006805
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Dawn Livorsi 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: dlivorsi@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Deborah May 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: dmay@abtc-centers.org Language(s): English Licenses: IL LCSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Robin McGinnis, MSW 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: rmcginnis@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Becky Palmer 715 Lake Street Oak Park, IL 60301	Phone: (708) 386-8145 x23 Fax: (708) 848-6176 Email: bpalmer802@aol.com Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Melissa Pannell 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x145 Fax: (847) 487-9360 Email: mpannell@abtc-centers.org Language(s): English Licenses: IL LPC, ABEL Certified
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



Lake

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Lauren Parks 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x146 Fax: (847) 487-9360 Email: lparks@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Kevin J. Robson 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x165 Fax: (847) 487-9037 Email: krobson@abtc-centers.org Language(s): English Licenses: First Aid, CPR Part I, Surrogate PatientTrainer
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Eva San Pedro 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 386-8145 Email: esanpedro@abtc-centers.org Language(s): English , Spanish Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Carolyn Seaman 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x135 Fax: (847) 487-9360 Email: cseaman@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Natalie Seel 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: nseel@abtc-centers.org Language(s): English Licenses: LSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Edgar F. Sherk 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: esherk@abtc-centers.org Language(s): English Licenses: IL LCSW #149-002963
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Susan Urban 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9037 Email: surban@abtc-centers.org Language(s): English Licenses: IL LCSW #149-011169
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



Lake

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:	Keef Weinstein 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: kweinstein@abtc-centers.org Language(s): English Licenses: IL LPC
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Karen Wolownik, MSW 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: kwolownik@abtc-centers.org Language(s): English Licenses: IL-LCSW #149-010954, CSW (Michigan), Certified Adolescent Sexual Offender Prof.
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Blain and Associates, P.C.

Name & Main Office Address:	Daun Blain 135 N. Greenleaf, Suite 204 Gurnee, IL 60031	Phone: (847) 625-0980 x2 Fax: (847) 223-0887 Email: daun_blain@yahoo.com Language(s): English Licenses: IL-LCPC-#180-000167
Services Provided:		
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Gerald Blain P.O. Box 855 Grayslake, IL 60085	Phone: (847) 791-5928 Fax: (847) 223-0887 Email: jerry2@core.com Language(s): English Licenses: IL LCPC-#180-002267, LSW
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Adam Krieger P.O. Box 855 Grayslake, IL 60085	Phone: (847) 791-5928 Fax: (847) 223-0887 Email: Language(s): English Licenses: IL LCSW
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Center for Contextual Change

Name & Main Office Address:	Don R.J. Castaldi, Psy.D. 125 N. Marion Street, Suite 201 Oak Park, IL 60301	Phone: (708) 524-1301 x2 Fax: (708) 524-1401 Email: donc@centerforcontextualchange.org Language(s): English Licenses: Advanced Training in Abel Screen
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Don R.J. Castaldi, Psy.D. 9239 Gross Point Road, Suite 300 Skokie, IL 60077	Phone: (708) 524-1301 x2 Fax: (708) 524-1401 Email: donc@centerforcontextualchange.org Language(s): English Licenses: Advanced Training in Abel Screen
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes



Sex Offender Management Board Approved Provider List - By County



Lake

Center for Contextual Change

Name & Main Office Address: Joseph J. Cortese
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (847) 676-4447 x312
Fax: (847) 676-4450
Email: cortese1@comcast.net
Language(s): English
Licenses: IL LCSW #149-000645

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Peg Duros
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (847) 676-4447 x221
Fax: (847) 676-4450
Email: pegd@centerforcontextualchange.org
Language(s): English
Licenses: IL LCSW #149-002016

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Joel A. Falco, MA, LCSW
125 N. Marion Street, Suite 201
Oak Park, IL 60301

Phone: (847) 674-4447 x300
Fax: (847) 676-4450
Email: hopecat@hotmail.com
Language(s): English
Licenses: IL LCSW, Clinical Member of ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Joel A. Falco, MA, LCSW
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (847) 674-4447 x300
Fax: (847) 676-4450
Email: hopecat@hotmail.com
Language(s): English
Licenses: IL LCSW, Clinical Member of ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Michael "Mike" Just
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (847) 676-4447 x301
Fax: (847) 676-4450
Email: justmikejust@sbcglobal.net
Language(s): English
Licenses: IL LCPC #180-006042; Attorney

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Michael "Mike" Just
125 N. Marion Street, Suite 201
Oak Park, IL 60301

Phone: (847) 676-4447 x301
Fax: (847) 676-4450
Email: justmikejust@sbcglobal.net
Language(s): English
Licenses: IL LCPC #180-006042; Attorney

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Kelli Underwood
125 N. Marion Street, Suite 201
Oak Park, IL 60301

Phone: (847) 676-4447 x223
Fax: (847) 676-4450
Email: kelliunderwoodccc@hotmail.com
Language(s): English
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Lake

Community Counseling Center, Ltd.

Name & Main Office Address: Jeffrey A. Martin
666 Russell Court, Suite 105
Woodstock, IL 60098

Phone: (815) 338-7749

Fax: (815) 338-7728

Email: ccc@imaxx.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW 149-003373

Community Youth Network, Inc.

Name & Main Office Address: Jeffery Miller
18640 W. Belvidere Road
Grayslake, IL 60030

Phone: (847) 548-6000

Fax: (847) 548-6040

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC; CADC

Name & Main Office Address: Randall W. Smith
18640 W. Belvidere Road
Grayslake, IL 60030

Phone: (847) 548-6000 x38

Fax: (847) 548-6040

Email: randall.w.smith@us.army.mil

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LPC; CADC; CSAP; EMDR 1 & 2

Name & Main Office Address: Jody Springer
18640 W. Belvidere Road
Grayslake, IL 60030

Phone: (847) 949-7275

Fax: (847) 548-6040

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW, LSW, Licensed direct child welfare services provider, CERAP certified

Name & Main Office Address: Scott E. Stolarick
18640 W. Belvidere Road
Grayslake, IL 60030

Phone: (847) 548-6000 x20

Fax: (847) 548-6040

Email: sstolarick@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

Counseling Connection

Name & Main Office Address: Thomas M. Schnatterbeck, Psy.D.
31480 Highway 45
Libertyville, IL 60048

Phone: (847) 680-2715 x257

Fax: (847) 680-3832

Email: tschnatterbeck@counselingconnections.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-006247



Sex Offender Management Board Approved Provider List - By County



Lake

Donald Sherwood, Psy.D.

Name & Main Office Address: Donald Sherwood, Psy.D.
37528 N. North Avenue
Beach Park, IL 60087

Phone: (847) 623-8866
Fax: (847) 625-8836

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Email:
Language(s): English
Licenses: IL LCP

Forensic Psych Associates, Ltd.

Name & Main Office Address: Robert H. Gordon, Ph.D.
203 N. LaSalle Street, #2100
Chicago, IL 60601

Phone: (312) 917-1610
Fax: (608) 756-5174
Email: rgordon@forensicpsych.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP

Forensic Psychology Associates

Name & Main Office Address: Mark Brenzinger, PsyD
445 E. Ohio, Suite 450
Chicago, IL 60611

Phone: (312) 740-9691
Fax: (312) 527-9088
Email: ciba9@worldnet.att.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Name & Main Office Address: Eric Ostrov, J.D., Ph.D., ABPP
445 E. Ohio, Suite 450
Chicago, IL 60611

Phone: (312) 740-9691
Fax: (312) 527-9088
Email: eostrov@aol.com
Language(s): English
Licenses: IL Psy.D. 071-001951, IL Attorney #3128938

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Susan Page, Psy.D.
445 E. Ohio, Suite 450
Chicago, IL 60611

Phone: (312) 399-3140
Fax: (312) 527-9088
Email: slpage27@aol.com

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Haymarket Center (McDermott Center)

Name & Main Office Address: Sherry S. Kostman, Psy.D., CADC, CCJAS, CFAE
120 N. Sangamon
Chicago, IL 60607

Phone: (312) 226-7984 x409
Fax: (312) 226-7964
Email: skostman@hcenter.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LPC #178-002577, CADC #24934, CCJAS #24552, CFAE, ATSA Clinical Member



Sex Offender Management Board Approved Provider List - By County



Lake

Illinois Youth Center (IYC) - Kewanee

Name & Main Office Address:		David Allred (IDOC) 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email:
<i>Services Provided:</i>		Provider Meets the following qualifications:	Language(s): English Licenses: IL LCPC #180-001084
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Stacey Andrews 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email:
<i>Services Provided:</i>		Provider Meets the following qualifications:	Language(s): English Licenses: IL LCSW
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Victor A. Kersey 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email:
<i>Services Provided:</i>		Provider Meets the following qualifications:	Language(s): English Licenses: None
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Katrina Maddox 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email: psychgirl75@sbcglobal.net
<i>Services Provided:</i>		Provider Meets the following qualifications:	Language(s): English Licenses: IL LPC #178-004175; NCC-National Certified Counselor
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Robert E. Olt 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email:
<i>Services Provided:</i>		Provider Meets the following qualifications:	Language(s): English Licenses: NCC; LCPC
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Lisa L. Potter 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email: lpotter9@aol.com
<i>Services Provided:</i>		Provider Meets the following qualifications:	Language(s): English Licenses: MS, MHP
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Kenneth G. Queen 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email:
<i>Services Provided:</i>		Provider Meets the following qualifications:	Language(s): English Licenses: IL LPC 178-004103
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



Lake

Illinois Youth Center (IYC) - Kewanee

Name & Main Office Address: Petrita Salazar
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Name & Main Office Address: Jeffrey P. L. Sim
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP #071-007028

Indian Oaks Academy

Name & Main Office Address: Daphne Bogenscheider
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700
Fax: (815) 468-2310
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: LCPC, EMDR Level I, CANS, CERAP

Name & Main Office Address: Michael Chavers
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3738
Fax: (815) 468-2310
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Name & Main Office Address: Thomas Duff
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700
Fax: (815) 468-2310
Email: dufft@nexus-ioa.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses:

Name & Main Office Address: Andrew Fisher
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700
Fax: (815) 468-2310
Email: fishera@nexus-ioa.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC

Name & Main Office Address: Sara E. Langevin, MA
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700
Fax: (815) 468-2310
Email: langevins@nexus-ioa.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses:



Sex Offender Management Board Approved Provider List - By County



Lake

Indian Oaks Academy

Name & Main Office Address: Amber Residori, LCSW
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3700
Fax: (815) 468-2310
Email: residori@nexus-ioa.org
Language(s): English, French
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: William K. Robison
101 Bramble
Manteno, IL 60950

Phone: (815) 802-3713
Fax: (815) 468-2310
Email: robisonw@Nexus-IOA.org
Language(s): English
Licenses: IL Clinical Psychology #071-006191; IL MFT 166-000144

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Kevin & Associates

Name & Main Office Address: Maureen Kevin, LCSW
110 Cottage Hill, Suite 305
Elmhurst, IL 60126

Phone: (630) 941-8270
Fax: (630) 941-8294
Email: mureenkevin@hotmail.com
Language(s): English
Licenses: IL LCSW #149-000550

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Kids Hope United

Name & Main Office Address: Kristan Cameron
215 N. Milwaukee Avenue
Lake Villa, IL 60046

Phone: (847) 245-6570
Fax: (847) 245-6714
Email: kcameron@kidshopeunited.org
Language(s): English
Licenses: IL LCPC 180-002580

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Shenandoah Cardwell
215 N. Milwaukee Avenue
Lake Villa, IL 60046

Phone: (847) 245-6544
Fax: (847) 245-6714
Email: scardwell.LCPC@comcast.net
Language(s): English
Licenses: IL LCPC #180-001256, WI LPC #2906-125, NCC #22818

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Denny Clouse, MSW, LCSW
1750 E. Main Street, Suite 40
St. Charles, IL 60174

Phone: (847) 741-7140
Fax: (847) 741-2089
Email: dclouse@kidshopeunited.org
Language(s): English
Licenses: IL LCSW #149-005893, Clinical ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Thomas F. Hayes
1750 East Main Street, Suite 40
St. Charles, IL 60174

Phone: (630) 513-6277 x22
Fax: (630) 513-4277
Email: thayes@kidshopeunited.org
Language(s): English
Licenses: IL LPC #178-003268

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Lake

Kids Hope United

Name & Main Office Address: Dennis Kyrouac
1750 E. Main Street, Suite 40
St. Charles, IL 60174

Phone: (847) 741-7140
Fax: (847) 741-2089
Email: dkyrouac@msn.com
Language(s): English
Licenses: IAODAPCA Counselor, CADC

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Liza Simon-Roper
215 N. Milwaukee Avenue
Lake Villa, IL 60046

Phone: (847) 245-6547
Fax: (847) 245-6714
Email: lsroper@kidshopeunited.org
Language(s): English
Licenses: IL LCSW, WI LCSW, ATSA Member

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Latino Family Services, P.C.

Name & Main Office Address: Arturo Hurtado, LCSW, ACSW
825 E. Golf Road, Suite 1133
Arlington Heights, IL 60005-5200

Phone: (847) 593-7077
Fax: (847) 593-7056
Email:
Language(s): English, Spanish
Licenses: IL LCSW-#149-005124, ACSW, ATSA Clinical Member

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Mack E. Winn and Associates

Name & Main Office Address: Mack E. Winn, LCSW
11 N. Skokie Highway, Suite 111
Lake Bluff, IL 60044

Phone: (847) 604-9451
Fax: (847) 604-9457
Email: mwatx111@yahoo.com
Language(s): English
Licenses: IL LCSW #149-003400, Clinical Member ATSA (1994-Present)

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Marcy Pritzen, LCSW

Name & Main Office Address: Marcy Pritzen, LCSW
3295 N. Arlington Heights Rd, Suite 103
Arlington Heights, IL 60004

Phone: (847) 636-6364
Fax: (847) 398-6595
Email: mpritzen@mindspring.com
Language(s): English
Licenses: IL LCSW #149-005331

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Michael R. Davison

Name & Main Office Address: Michael R. Davison
3295 N. Arlington Heights Road, Suite 103
Arlington Heights, IL 60004

Phone: (847) 788-0645
Fax: (847) 398-6595
Email: apsydoc@aol.com
Language(s): English
Licenses: IL LCP #071005-382

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Lake

Oak Forest Psychological Service, P.C.

Name & Main Office Address: Mitchell Hicks, Ph.D., LCPC
6320 W. 159th Street, Suite E
Oak Forest, IL 60452

Phone: (708) 429-2777 x27

Fax:

Email: mwhicks@drmittelhicks.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-005185, IL LCP #071-006835,
Clinical Member of ATSA

Name & Main Office Address: Dr. Barbra Kraus
6320 W. 159th Street, Suite E
Oak Forest, IL 60452

Phone: (708) 429-2777

Fax: (708) 429-2780

Email: bkraus@oakforestpsych.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP-#071-006308

RITAS Ministry

Name & Main Office Address: Judith "Jude" C. Skallerup
325 E. Galena
Aurora, IL 60505

Phone: (630) 966-0252

Fax: (630) 966-0005

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-004615, CSOTS

Ronald B. Baron, M.D.

Name & Main Office Address: Ronald B. Baron, M.D.
2120 Sheridan Road
Highland Park, IL 60035-2404

Phone: (847) 432-7007

Fax: (847) 432-7034

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: Certified Forensic Psychiatrist

Ronald Baker, M.D.

Name & Main Office Address: Ronald B. Baker, M.D.
2120 Sheridan Road
Highland Park, IL 60035

Phone: (847) 432-7007

Fax: (847) 432-7034

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Medical License # 036-039021, Certified in
Psychiatry and Forensic Psychiatry from the
American Board of Psychiatry and Neurology

Sherry S. Kostman, Psy.D., CADC, CCJAS, CFAE

Name & Main Office Address: Sherry S. Kostman, Psy.D., CADC, CCJAS, CFAE
445 East Ohio
Chicago, IL 60611

Phone: (312) 315-4411

Fax: (312) 527-5397

Email: skostman@hcenter.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LPC #178-002577, CADC #24934, CCJAS
#24552, CFAE, ATSA Clinical Member



Sex Offender Management Board Approved Provider List - By County



Lake

Suburban Counseling Services

Name & Main Office Address: Suzanne Palmer
135 N. Greenleaf, Suite #208
Gurnee, IL 60031

Phone: (847) 599-1551
Fax: (847) 599-1569
Email: suzannepalmer@comcast.com
Language(s): English
Licenses: IL LCPC, ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

William "Kip" Hillman, Psy.D.

Name & Main Office Address: William "Kip" Hillman, Psy.D.
4064 N. Lincoln, #290
Chicago, IL 60618

Phone: (312) 933-0060
Fax: (773) 989-0275
Email: kiphillman@yahoo.com
Language(s): English
Licenses: IL Psychology 071-003686

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

LaSalle

7th Fire Counseling

Name & Main Office Address: Leo J. Meagher
218 W. Madison Street
Ottawa, IL 61350

Phone: (815) 433-4829
Fax: (815) 433-4028
Email: chawk@mtco.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC, Clinically Cert. Forensic Counselor, Clinically Cert. DV Counselor, Cert. Clinical Criminal Justice Specialist, Master Addiction Counselor, Cert. Diplomate in Clinical Hypnothe

Alliances Counseling Services

Name & Main Office Address: Ronelle Allen
119 W. First Street, Suite 110
Dixon, IL 61021

Phone: (815) 285-3073
Fax: (815) 285-3103
Email: alliances@cin.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC

Name & Main Office Address: Brian Smith
119 W. First Street, Suite 110
Dixon, IL 61021

Phone: (815) 285-3073
Fax: (815) 285-3103
Email: alliances@cin.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW

Art Therapy and Counseling Services

Name & Main Office Address: Laurie A. Cox
101 E. College Avenue, Suite D
Normal, IL 61761

Phone: (309) 452-5326
Fax: (309) 452-5356
Email: coxlaurie@msn.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC, CADAC



Sex Offender Management Board Approved Provider List - By County



LaSalle

Assisted Awareness

Name & Main Office Address: Karen L. Smith, MA, LCPC
81 N. Chicago Street, Suite 202
Joliet, IL 60432

Phone: (815) 723-2844
Fax: (815) 740-8817
Email: karenspc@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC

Name & Main Office Address: Richard D. "Bo" Travis, MA, LCPC
81 N. Chicago Street, Suite 202
Joliet, IL 60432

Phone: (815) 723-2844
Fax: (815) 740-8817
Email: botravis@earthlink.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC-#180-003461

Glenwood Testing Center

Name & Main Office Address: Frank E. Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-8133
Fax: (815) 968-4656
Email: fec@juno.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP #071-002590

Name & Main Office Address: Kyle Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-5342
Fax: (815) 968-4656
Email: drcushing@juno.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP, Consulting Forensic Examiner

RITAS Ministry

Name & Main Office Address: Judith "Jude" C. Skallerup
325 E. Galena
Aurora, IL 60505

Phone: (630) 966-0252
Fax: (630) 966-0005
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC-180-004615, CSOTS

Youth Service Bureau of Illinois Valley

Name & Main Office Address: Lisa Kay Gustafson
424 W. Madison
Ottawa, IL 61350

Phone: (815) 433-3953
Fax: (815) 433-3980
Email: lisa@ysbiv.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC #180-004529



Sex Offender Management Board Approved Provider List - By County



LaSalle

Youth Service Bureau of Illinois Valley

Name & Main Office Address: Cynthia Robinson
424 W. Madison
Ottawa, IL 61350

Phone: (815) 433-3953
Fax: (815) 433-3980
Email: cindy@ysbiv.org
Language(s): English
Licenses: IL LCSW #149-007877

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Lawrence

Brown Counseling & Consulting

Name & Main Office Address: Jeffrey R. Brown
2622 Washington Avenue
Vincennes, IN 47591

Phone: (812) 887-5431
Fax: (812) 886-3010
Email: lazlo81@charter.net
Language(s): English
Licenses: ACSW; LCSW, IL #148-008300 & IN #34001119A; CADC III; ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Lee

Alliances Counseling Services

Name & Main Office Address: Ronelle Allen
119 W. First Street, Suite 110
Dixon, IL 61021

Phone: (815) 285-3073
Fax: (815) 285-3103
Email: alliances@cin.net
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Brian Smith
119 W. First Street, Suite 110
Dixon, IL 61021

Phone: (815) 285-3073
Fax: (815) 285-3103
Email: alliances@cin.net
Language(s): English
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Braden Counseling Center

Name & Main Office Address: Danielle Calsyn
2580 DeKalb Avenue
Sycamore, IL 60178

Phone: (815) 787-9000
Fax: (815) 787-9015
Email: dcalsyn@frontiernet.net
Language(s): English
Licenses: CADC #21278

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Elaine M. Bochenek, Psy.D., CADC

Name & Main Office Address: Elaine M. Bochenek, Psy.D., CADC
115 W. First Street
Dixon, IL 61021

Phone: (815) 285-8394
Fax:
Email:
Language(s): English
Licenses: IL LCP #071-006418, CADC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Lee

Family Services Agency of DeKalb County, Inc.

Name & Main Office Address: Kathleen M. Alberts, MSW, LCPC
14 Health Services Drive
DeKalb, IL 60115

Phone: (815) 758-8618

Fax: (815) 758-7569

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-004462; Certified Sex Offender
Tx Specialist

Family, Divorce & Mediation of Ogle County

Name & Main Office Address: Kathleen M. Alberts, MSW, LCPC
1500 West Lincoln Avenue
Rochelle, IL 61068

Phone: (815) 562-8818

Fax: (815) 562-8818

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-004462; Certified Sex Offender
Tx Specialist

Forensic Psych Associates, Ltd.

Name & Main Office Address: Robert H. Gordon, Ph.D.
203 N. LaSalle Street, #2100
Chicago, IL 60601

Phone: (312) 917-1610

Fax: (608) 756-5174

Email: rgordon@forensicpsych.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP

Jeffrey B. Sundberg

Name & Main Office Address: Jeffrey B. Sundberg
P. O. Box 17044, 610 A East State Street
Rockford, IL 61110

Phone: (815) 332-8342

Fax: (815) 332-8342

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-003876, ACSW, ATSA Member

Robert Young Center for Community Mental Health

Name & Main Office Address: Lisa Curry
4600 3rd Street
Moline, IL 61265

Phone: (309) 779-2038

Fax: (309) 779-2167

Email: currylctrinityqc.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-149-005922, LISW-Iowa

Name & Main Office Address: Scott Stange
4600 3rd Street
Moline, IL 61265

Phone: (309) 779-2031

Fax: (309) 779-2167

Email: stange@trinityqc.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW, LISW, Clinical Member ATSA



Sex Offender Management Board Approved Provider List - By County



Livingston

7th Fire Counseling

Name & Main Office Address: Leo J. Meagher
218 W. Madison Street
Ottawa, IL 61350

Phone: (815) 433-4829
Fax: (815) 433-4028
Email: chawk@mtco.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC, Clinically Cert. Forensic Counselor, Clinically Cert. DV Counselor, Cert. Clinical Criminal Justice Specialist, Master Addiction Counselor, Cert. Diplomate in Clinical Hypnothe

ABC Counseling and Family Services

Name & Main Office Address: Lynn Willard, MA, MSW
705 E. Lincoln
Normal, IL 61761

Phone: (309) 451-9495
Fax: (309) 451-9404
Email: lwillard@abccounseling.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC #180-004238

Art Therapy and Counseling Services

Name & Main Office Address: Laurie A. Cox
101 E. College Avenue, Suite D
Normal, IL 61761

Phone: (309) 452-5326
Fax: (309) 452-5356
Email: coxlaurie@msn.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC, CADC

Assisted Awareness

Name & Main Office Address: Karen L. Smith, MA, LCPC
81 N. Chicago Street, Suite 202
Joliet, IL 60432

Phone: (815) 723-2844
Fax: (815) 740-8817
Email: karenspc@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC

Name & Main Office Address: Richard D. "Bo" Travis, MA, LCPC
81 N. Chicago Street, Suite 202
Joliet, IL 60432

Phone: (815) 723-2844
Fax: (815) 740-8817
Email: botravis@earthlink.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC-#180-003461

Community Resource and Counseling Center

Name & Main Office Address: Laurelyn Cropek
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: crcc@illicom.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW-149-005667



Sex Offender Management Board Approved Provider List - By County



Livingston

Community Resource and Counseling Center

Name & Main Office Address: Laurie A. Gilbert
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: lgilbert@4crcc.org
Language(s): English
Licenses: IL LCSW-149-010484

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Christine Mayer
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: ccrc@illicom.net
Language(s): English
Licenses: IL LCSW-149.009275

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Jeffrey C. Reynolds
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: jreynolds@4crcc.org
Language(s): English
Licenses: IL LCPC #180-004199

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Darlene M. Bushue, M.A., LCPC

Name & Main Office Address: #Error

Phone: (618) 444-7736
Fax:
Email:
Language(s): English
Licenses: IL LCPC 180-004485

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Institute of Human Resources

Name & Main Office Address: Robert W. Kinas
310 Torrance Avenue, Box 768
Pontiac, IL 61764

Phone: (815) 844-6109
Fax: (815) 844-3561
Email:
Language(s): English
Licenses: IL LCPC #180-001488, AODA-CADC #1489, MISA II 18831

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Lutheran Social Services of Illinois

Name & Main Office Address: Dee Ann Foss
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x271
Fax: (309) 671-0503
Email: deeanne.foss-reimers@lssi.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Livingston

Lutheran Social Services of Illinois

Name & Main Office Address: Yvonne Wojtalik
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x245
Fax: (309) 671-0503
Email: yvonne.wojtalik@lssi.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Onarga Academy

Name & Main Office Address: Rebecca Cunningham
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: rcunnin@nexus-ona.org
Language(s): English
Licenses: IL LCPC #180-001150

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: William D. Featherstone
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: bfeathe@nexus-ona.org
Language(s): English
Licenses:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Douglas C. Gossett, M.A., LCPC
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: dgossset@nexus-ona.org
Language(s): English
Licenses: IL LCPC #180-005298

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Jamie Kozma
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: jkozma@nexus-ona.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Bill Mitchell
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: wmitche@nexus-ona.org
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Karen Robertie
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: krobert@nexus-ona.org
Language(s): English
Licenses: IL LCPC 180-005314

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Livingston

Onarga Academy

Name & Main Office Address: Michael D. Simpson
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: msimpso@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC 180-005921

Name & Main Office Address: Tricia Renee St. Pierre
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: tstpier@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: NCC

Name & Main Office Address: Ryan Weidenbenner
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: rweiden@nexus-ong.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC

Name & Main Office Address: Timothy E. White
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: twhite@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Logan

Art Therapy and Counseling Services

Name & Main Office Address: Laurie A. Cox
101 E. College Avenue, Suite D
Normal, IL 61761

Phone: (309) 452-5326
Fax: (309) 452-5356
Email: coxlaurie@msn.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC, CADAC

Bohlen & Associates, SC

Name & Main Office Address: Joseph G. Bohlen, MD, Ph.D.
3001 Spring Mill Drive, Suite D
Springfield, IL 62704

Phone: (217) 546-3100
Fax: (217) 546-3284
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL Physicians & Surgeons



Sex Offender Management Board Approved Provider List - By County



Logan

Clinical Systems, Inc.

Name & Main Office Address:	Louis M. Douglas 3151 Butler Springfield, IL 62703	Phone: (217) 529-2142 Fax: Email: ldouglas@insightbb.com Language(s): English Licenses: LPC, CADC, CCJP, MISA II
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Name & Main Office Address:	Michael G. Howie 3151 Butler Springfield, IL 62703	Phone: (217) 529-2142 Fax: (217) 529-2174 Email: mhowie1@earthlink.net Language(s): English Licenses: IL LCPC
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	No	All treatment provider qualifications? No
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	No	All applicant attestation qualifications? Yes

Name & Main Office Address:	Karen L. Streight 3151 Butler Springfield, IL 62703	Phone: (271) 529-2142 Fax: (217) 529-2174 Email: clinicalsystems@yahoo.com Language(s): English Licenses: IL LCPC #180-003070
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Cokley, Sunderland & Cokley

Name & Main Office Address:	Robert L. Cokley, Ph.D. 348 West Prairie Avenue, Suite Decatur, IL 62522	Phone: (217) 422-0053 Fax: (217) 422-0374 Email: Language(s): English Licenses: IL LCSW- #149-000865, Doctorate
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Gregory S. Viniard

Name & Main Office Address:	Gregory S. Viniard 3151 Butler Springfield, IL 62703	Phone: (217) 529-2142 Fax: (217) 529-2174 Email: Language(s): English Licenses: IL LCPC #180-003061, Clinically Certified Forensic Counselor #F18393, Clinically Certified DV Counselor #F18394
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Lutheran Social Services of Illinois

Name & Main Office Address:	Dee Ann Foss 3000 W. Rohmann West Peoria, IL 61604	Phone: (309) 671-0300 x271 Fax: (309) 671-0503 Email: deeanne.foss-reimers@lssi.org Language(s): English Licenses: IL LCPC
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes



Sex Offender Management Board Approved Provider List - By County



Logan

Lutheran Social Services of Illinois

Name & Main Office Address: Yvonne Wojtalik
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x245
Fax: (309) 671-0503
Email: yvonne.wojtalik@lssi.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Midwest Counseling

Name & Main Office Address: Bryan Denure
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885
Fax:
Email:
Language(s): English
Licenses: IL LPC #180-005002, CRADC

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Keir L. Goatley
917 Clocktower Dr. #420
Springfield, IL 62704

Phone: (217) 726-8744
Fax:
Email: kgoatley@ameritech.net
Language(s): English
Licenses: IL LCPC-#180-004321, (IDPR), CCBT, ATLSA, IL-ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Gil Pilapil
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885
Fax:
Email:
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Macon

ABC Counseling and Family Services

Name & Main Office Address: Lynn Willard, MA, MSW
705 E. Lincoln
Normal, IL 61761

Phone: (309) 451-9495
Fax: (309) 451-9404
Email: lwillard@abccounseling.org
Language(s): English
Licenses: IL LCPC #180-004238

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Art Therapy and Counseling Services

Name & Main Office Address: Laurie A. Cox
101 E. College Avenue, Suite D
Normal, IL 61761

Phone: (309) 452-5326
Fax: (309) 452-5356
Email: coxlaurie@msn.com
Language(s): English
Licenses: IL LCPC, CADC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Macon

Bohlen & Associates, SC

Name & Main Office Address: Joseph G. Bohlen, MD, Ph.D.
3001 Spring Mill Drive, Suite D
Springfield, IL 62704

Phone: (217) 546-3100

Fax: (217) 546-3284

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Physicians & Surgeons

Clinical Systems, Inc.

Name & Main Office Address: Louis M. Douglas
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142

Fax:

Email: ldouglas@insightbb.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: LPC, CADC, CCJP, MISA II

Name & Main Office Address: Michael G. Howie
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142

Fax: (217) 529-2174

Email: mhowie1@earthlink.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

Name & Main Office Address: Karen L. Streight
3151 Butler
Springfield, IL 62703

Phone: (271) 529-2142

Fax: (217) 529-2174

Email: clinicalsystems@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-003070

Cokley, Sunderland & Cokley

Name & Main Office Address: Robert L. Cokley, Ph.D.
348 West Prairie Avenue, Suite
Decatur, IL 62522

Phone: (217) 422-0053

Fax: (217) 422-0374

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW- #149-000865, Doctorate

Gary Lemmon and Associates, Inc.

Name & Main Office Address: Gary L. Lemmon
904 E. Main
Norris City, IL 62869

Phone: (618) 378-3010

Fax: (618) 378-2308

Email: glemmon@shawneelink.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-#149-00164, Clinical Member ATSA



Sex Offender Management Board Approved Provider List - By County



Macon

Gregory S. Viniard

Name & Main Office Address: Gregory S. Viniard
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142

Fax: (217) 529-2174

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-003061, Clinically Certified
Forensic Counselor #F18393, Clinically
Certified DV Counselor #F18394

N. Dwayne Williams

Name & Main Office Address: N. Dwayne Williams
332 W. Marion, Suite 6
Forsyth, IL 62535

Phone: (217) 877-8558

Fax: (217) 877-5758

Email: indy1989@hotmail.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-002801, AAMFT Clinical
Member

Terry D. Campbell, MS

Name & Main Office Address: Terry D. Campbell, MS
P.O. Box 17
Sherman, IL 62684

Phone: (217) 566-2552

Fax: (217) 566-2552

Email: campbell@warpsnet.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LPC-#180-005797

Macoupin

Alternatives Counseling, Inc.

Name & Main Office Address: Donya Adkerson, MA
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085

Fax: (618) 288-8959

Email: donya2@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-000271

Name & Main Office Address: Bethany A. Munge, M.A., Q.M.H.P.
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085 x202

Fax: (618) 288-8959

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Bohlen & Associates, SC

Name & Main Office Address: Joseph G. Bohlen, MD, Ph.D.
3001 Spring Mill Drive, Suite D
Springfield, IL 62704

Phone: (217) 546-3100

Fax: (217) 546-3284

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Physicians & Surgeons



Sex Offender Management Board Approved Provider List - By County



Macoupin

Clinical Systems, Inc.

Name & Main Office Address:	Louis M. Douglas 3151 Butler Springfield, IL 62703	Phone: (217) 529-2142 Fax: Email: ldouglas@insightbb.com Language(s): English Licenses: LPC, CADC, CCJP, MISA II
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Name & Main Office Address:	Michael G. Howie 3151 Butler Springfield, IL 62703	Phone: (217) 529-2142 Fax: (217) 529-2174 Email: mhowie1@earthlink.net Language(s): English Licenses: IL LCPC
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	No	All treatment provider qualifications? No
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	No	All applicant attestation qualifications? Yes

Name & Main Office Address:	Karen L. Streight 3151 Butler Springfield, IL 62703	Phone: (271) 529-2142 Fax: (217) 529-2174 Email: clinicalsystems@yahoo.com Language(s): English Licenses: IL LCPC #180-003070
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Darlene M. Bushue, M.A., LCPC

Name & Main Office Address:	#Error	Phone: (618) 444-7736 Fax: Email: Language(s): English Licenses: IL LCPC 180-004485
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	No	All applicant attestation qualifications? Yes

Gregory S. Viniard

Name & Main Office Address:	Gregory S. Viniard 3151 Butler Springfield, IL 62703	Phone: (217) 529-2142 Fax: (217) 529-2174 Email: Language(s): English Licenses: IL LCPC #180-003061, Clinically Certified Forensic Counselor #F18393, Clinically Certified DV Counselor #F18394
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Madison

Alternatives Counseling, Inc.

Name & Main Office Address:	Donya Adkerson, MA 88 S. Main, Suite 2, P.O. Box 639 Glen Carbon, IL 62034	Phone: (618) 288-8085 Fax: (618) 288-8959 Email: donya2@aol.com Language(s): English Licenses: IL LCPC-180-000271
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes



Sex Offender Management Board Approved Provider List - By County



Madison

Alternatives Counseling, Inc.

Name & Main Office Address: Bethany A. Munge, M.A., Q.M.H.P.
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085 x202
Fax: (618) 288-8959

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Email:
Language(s): English
Licenses: None

Daniel J. Cuneo, Ph.D.

Name & Main Office Address: Daniel J. Cuneo, Ph.D.
2217 W. Main
Belleville, IL 62226

Phone: (618) 277-5498
Fax: (618) 235-4316
Email: dcuneo@charter.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL 071-002307 & MO Psychologist

Darlene M. Bushue, M.A., LCPC

Name & Main Office Address: #Error

Phone: (618) 444-7736

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Fax:
Email:
Language(s): English
Licenses: IL LCPC 180-004485

Kelle Divis

Name & Main Office Address: #Error

Phone: (314) 574-2083

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Fax: (636) 379-1877
Email:
Language(s): English
Licenses: IL LCPC

Provident Counseling

Name & Main Office Address: Caroline M. Foss
2650 Olive Street
St. Louis, MO 63103

Phone: (314) 371-6500 x1127
Fax: (314) 371-6508
Email: cfoss@providentc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Name & Main Office Address: James M. Moll
2650 Olive Street
St. Louis, MO 63103

Phone: (314) 802-2598
Fax: (314) 371-6508
Email: jm@providentc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None



Sex Offender Management Board Approved Provider List - By County



Madison

Provident Counseling

Name & Main Office Address: Margaret A. Schicker
2650 Olive Street
St. Louis, MO 63103

Phone: (314) 371-6500
Fax: (314) 371-6508
Email: margaret.schicker@providentc.org
Language(s): English
Licenses: LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Marion

Alternatives Counseling, Inc.

Name & Main Office Address: Donya Adkerson, MA
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085
Fax: (618) 288-8959
Email: donya2@aol.com
Language(s): English
Licenses: IL LCPC-180-000271

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Bethany A. Munge, M.A., Q.M.H.P.
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085 x202
Fax: (618) 288-8959
Email:
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Bohlen & Associates, SC

Name & Main Office Address: Joseph G. Bohlen, MD, Ph.D.
3001 Spring Mill Drive, Suite D
Springfield, IL 62704

Phone: (217) 546-3100
Fax: (217) 546-3284
Email:
Language(s): English
Licenses: IL Physicians & Surgeons

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Community Resource Center

Name & Main Office Address: Thomas Sims
101 S. Locust Street
Centralia, IL 62801

Phone: (618) 533-1391
Fax: (618) 533-0012
Email: simstwo@yahoo.com
Language(s): English
Licenses: IL LPC 178-003866

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Dale H. Spittler
101 S. Locust Street
Centralia, IL 62801

Phone: (618) 533-1391
Fax: (618) 533-0012
Email:
Language(s): English
Licenses: IL LCSW #149-003298, Academy of Certified Social Workers

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Marion

Effingham County Probation Office

Name & Main Office Address: Sandy Taylor, MS, LCPC
106 N. Third Street
Effingham, IL 62401-3456

Phone: (217) 347-7931
Fax: (217) 347-2001
Email: sandy_taylor9@yahoo.com
Language(s): English
Licenses: IL LCPC #180-005527

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Linda Stover and Associates

Name & Main Office Address: Linda Stover, M.S.Ed, LCPC, CCJS, CSOTS
417 E. Calumet
Centralia, IL 62801

Phone: (618) 322-2811
Fax: (618) 532-6805
Email: lstover@netwitz.net
Language(s): English
Licenses: IL LCPC, Certified Criminal Justice Specialist,
ATSA Member, Certified Sex Offender
Treatment Specialist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Marshall

Lutheran Social Services of Illinois

Name & Main Office Address: Dee Ann Foss
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x271
Fax: (309) 671-0503
Email: deeanne.foss-reimers@lssi.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Yvonne Wojtalik
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x245
Fax: (309) 671-0503
Email: yvonne.wojtalik@lssi.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

P. F. Dover Counseling, LLC

Name & Main Office Address: James R. Seavey
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 495-4924
Fax: (309) 495-4993
Email: jspfdovercounseling@yahoo.com
Language(s): English
Licenses: IL LCPC #180-001434

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Scott A. Smith
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 477-2278
Fax: (309) 477-3113
Email: sspfdovercounseling@yahoo.com
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Mason

Clinical Systems, Inc.

Name & Main Office Address: Louis M. Douglas
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142

Fax:

Email: ldouglas@insightbb.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: LPC, CADC, CCJP, MISA II

Name & Main Office Address: Michael G. Howie
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142

Fax: (217) 529-2174

Email: mhowie1@earthlink.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

Name & Main Office Address: Karen L. Streight
3151 Butler
Springfield, IL 62703

Phone: (271) 529-2142

Fax: (217) 529-2174

Email: clinicalsystems@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-003070

Lutheran Social Services of Illinois

Name & Main Office Address: Dee Ann Foss
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x271

Fax: (309) 671-0503

Email: deeanne.foss-reimers@lssi.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

Name & Main Office Address: Yvonne Wojtalik
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x245

Fax: (309) 671-0503

Email: yvonne.wojtalik@lssi.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

Massac

First Judicial Circuit of Illinois-Probation & Court Services

Name & Main Office Address: Marlynn A. Frailey
201 W. Main
Marion, IL 62959

Phone: (618) 993-1840

Fax: (618) 993-1865

Email: mfrailey@firstcircuitprobation.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: CAC; IAODAPCA #6771



Sex Offender Management Board Approved Provider List - By County



Massac

Massac County Mental Health

Name & Main Office Address: Patricia Gillespie
206 W. 5th Street
Metropolis, IL 62960

Phone: (618) 524-9368

Fax: (618) 524-9551

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: Sexual Abuse Treatment Counselor, BS, MHP,
17 yrs experience

Name & Main Office Address: Yvonne J. Rath
206 W. 5th Street
Metropolis, IL 62960

Phone: (618) 524-9368

Fax: (618) 524-9551

Email: mcmh@hcis.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, NCC, MAC, CCJS, PCGC, CARF,
Medicaid, Child Welfare, Substance Abuse -
Agency, Individual

Michael E. Althoff, Ph.D.

Name & Main Office Address: Michael E. Althoff, Ph.D.
201 E. Main, Suite 3D
Carbondale, IL 62901

Phone: (618) 549-3587

Fax: (618) 549-2695

Email: mealthoff@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, IL Clinical Member - ATSA

McDonough

9th Judicial Circuit

Name & Main Office Address: Tye Adair
130 Lafayette, Suite 10
Macomb, IL 61455

Phone: (309) 837-2307

Fax: (309) 833-5570

Email: tadair@9thjudicial.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Knox County Juvenile Detention Home - Court Services, 9th Judicial

Name & Main Office Address: Stewart Nyi
1319 E. 5th
Galesburg, IL 61401

Phone: (309) 342-2481

Fax: (309) 343-7922

Email: snyi@9thjudicial.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-001104

McHenry

Affiliated Psychologists, LTD

Name & Main Office Address: Patrick Hoatlin, LCSW
4801 W. Peterson Avenue, Suite 525
Chicago, IL 60646

Phone: (773) 286-3100

Fax: (773) 777-7543

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-011120



Sex Offender Management Board Approved Provider List - By County



McHenry

Affiliated Psychologists, LTD

Name & Main Office Address:		Barry M. Leavitt, Psy.D. 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (773) 286-3100 Fax: (773) 777-7543 Email: ckopeny@ap-ltd.com Language(s): English Licenses: IL LCP, Hare Psychopathy Checklist (PCL-R) Certification
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Ray Quackenbush 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (773) 286-3100 Fax: (773) 777-7543 Email: quaq@earthlink.net Language(s): English Licenses: IL Psychology License #091-006293, Clinical Member ATSA
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Phil Reidda, Ph.D. 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (773) 286-3100 Fax: (773) 777-7543 Email: ckopeny@ap-ltd.com Language(s): English Licenses: IL LCP, Hare Psychopathy Checklist (PCL-R) Certification, Diplomat American Board Professional Psychologists
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Laura T. Schultz, Psy.D. 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (773) 286-3100 Fax: (773) 777-7543 Email: Language(s): English Licenses: IL LCP
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Pamela C. Van Wyk 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (765) 721-7863 Fax: (773) 777-7543 Email: pcvw811@illicom.net Language(s): English Licenses: IL-LCPC, IN-LMHC, AL-LMFT, ATSA Clinical Member
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	No	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	No		

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Michael Albert 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: malbert@abtc-centers Language(s): English Licenses: IL LPC
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Jenny Anderson 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 587-7905 Fax: (847) 487-9360 Email: janderson@abtc-centers.org Language(s): English Licenses: IL LSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



McHenry

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Jenifer Brickman 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: jbrickman@abtc-centers.org Language(s): English Licenses: IL LCSW-149-010065
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Arturo Gudino, Jr. 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 x226 Fax: (708) 386-8145 Email: agudino@abtc-centers.org Language(s): English , Spanish Licenses: IL LCPC#180-004330
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Michael Igaravidez, Psy.D. 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 386-8145 Email: migaravidez@abtc-centers.org Language(s): English Licenses: IL LCP #071-006172
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Theresa Jackson 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 848-6176 Email: tjackson@abtc-centers.org Language(s): English Licenses: IL LSW-#150-006805
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Dawn Livorsi 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: dlivorsi@abtc-centers.org Language(s): English Licenses: None
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Deborah May 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: dmay@abtc-centers.org Language(s): English Licenses: IL LCSW
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Robin McGinnis, MSW 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: rmcginnis@abtc-centers.org Language(s): English Licenses: None
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



McHenry

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Becky Palmer 715 Lake Street Oak Park, IL 60301	Phone: (708) 386-8145 x23 Fax: (708) 848-6176 Email: bpalmer802@aol.com Language(s): English Licenses: None
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Melissa Pannell 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x145 Fax: (847) 487-9360 Email: mpannell@abtc-centers.org Language(s): English Licenses: IL LPC, ABEL Certified
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Lauren Parks 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x146 Fax: (847) 487-9360 Email: lparks@abtc-centers.org Language(s): English Licenses: None
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Kevin J. Robson 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x165 Fax: (847) 487-9037 Email: krobson@abtc-centers.org Language(s): English Licenses: First Aid, CPR Part I, Surrogate Patient Trainer
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Eva San Pedro 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 386-8145 Email: esanpedro@abtc-centers.org Language(s): English , Spanish Licenses: None
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Carolyn Seaman 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x135 Fax: (847) 487-9360 Email: cseaman@abtc-centers.org Language(s): English Licenses: None
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Natalie Seel 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: nseel@abtc-centers.org Language(s): English Licenses: LSW
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



McHenry

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:	Edgar F. Sherk 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: esherk@abtc-centers.org Language(s): English Licenses: IL LCSW #149-002963
Services Provided:		
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Susan Urban 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9037 Email: surban@abtc-centers.org Language(s): English Licenses: IL LCSW #149-011169
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Keef Weinstein 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: kweinstein@abtc-centers.org Language(s): English Licenses: IL LPC
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Karen Wolownik, MSW 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: kwolownik@abtc-centers.org Language(s): English Licenses: IL-LCSW #149-010954, CSW (Michigan), Certified Adolescent Sexual Offender Prof.
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Blain and Associates, P.C.

Name & Main Office Address:	Daun Blain 135 N. Greenleaf, Suite 204 Gurnee, IL 60031	Phone: (847) 625-0980 x2 Fax: (847) 223-0887 Email: daun_blain@yahoo.com Language(s): English Licenses: IL-LCPC-#180-000167
Services Provided:		
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Gerald Blain P.O. Box 855 Grayslake, IL 60085	Phone: (847) 791-5928 Fax: (847) 223-0887 Email: jerry2@core.com Language(s): English Licenses: IL LCPC-#180-002267, LSW
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Adam Krieger P.O. Box 855 Grayslake, IL 60085	Phone: (847) 791-5928 Fax: (847) 223-0887 Email: Language(s): English Licenses: IL LCSW
Services Provided:		
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications? Yes



Sex Offender Management Board Approved Provider List - By County



McHenry

Braden Counseling Center

Name & Main Office Address: Danielle Calsyn
2580 DeKalb Avenue
Sycamore, IL 60178

Phone: (815) 787-9000
Fax: (815) 787-9015
Email: dcalsyn@frontiernet.net
Language(s): English
Licenses: CADC #21278

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Centegral HealthSystem/Horizons

Name & Main Office Address: Robert Meyer
527 W. South Street
Woodstock, IL 60098

Phone: (815) 338-9199
Fax: (815) 338-9205
Email: rmeyer3@charter.net
Language(s): English
Licenses: Ph.D., LCP, Fellow Academy of Forensic Psychologist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Community Counseling Center, Ltd.

Name & Main Office Address: Jeffrey A. Martin
666 Russell Court, Suite 105
Woodstock, IL 60098

Phone: (815) 338-7749
Fax: (815) 338-7728
Email: ccc@imaxx.net
Language(s): English
Licenses: IL LCSW 149-003373

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Cornerstone Clinical Associates, Ltd.

Name & Main Office Address: Warren B. Matson
300 S. County Farm Road, #E
Wheaton, IL 60187

Phone: (630) 871-0770
Fax: (630) 871-0772
Email: wmatson@email.com
Language(s): English
Licenses: LCPC, ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Forensic Psych Associates, Ltd.

Name & Main Office Address: Robert H. Gordon, Ph.D.
203 N. LaSalle Street, #2100
Chicago, IL 60601

Phone: (312) 917-1610
Fax: (608) 756-5174
Email: rgordon@forensicpsych.com
Language(s): English
Licenses: IL LCP

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Glenwood Testing Center

Name & Main Office Address: Frank E. Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-8133
Fax: (815) 968-4656
Email: fec@juno.com
Language(s): English
Licenses: IL LCP #071-002590

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board

Approved Provider List - By County



McHenry

Glenwood Testing Center

Name & Main Office Address: Kyle Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-5342

Fax: (815) 968-4656

Email: drcushing@juno.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, Consulting Forensic Examiner

Kids Hope United

Name & Main Office Address: Kristan Cameron
215 N. Milwaukee Avenue
Lake Villa, IL 60046

Phone: (847) 245-6570

Fax: (847) 245-6714

Email: kcameron@kidshopeunited.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC 180-002580

Name & Main Office Address: Shenandoah Cardwell
215 N. Milwaukee Avenue
Lake Villa, IL 60046

Phone: (847) 245-6544

Fax: (847) 245-6714

Email: scardwell.LCPC@comcast.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-001256, WI LPC #2906-125, NCC #22818

Name & Main Office Address: Denny Clouse, MSW, LCSW
1750 E. Main Street, Suite 40
St. Charles, IL 60174

Phone: (847) 741-7140

Fax: (847) 741-2089

Email: dclouse@kidshopeunited.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-005893, Clinical ATSA

Name & Main Office Address: Thomas F. Hayes
1750 East Main Street, Suite 40
St. Charles, IL 60174

Phone: (630) 513-6277 x22

Fax: (630) 513-4277

Email: thayes@kidshopeunited.org

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LPC #178-003268

Name & Main Office Address: Dennis Kyrouac
1750 E. Main Street, Suite 40
St. Charles, IL 60174

Phone: (847) 741-7140

Fax: (847) 741-2089

Email: dkyrouac@msn.com

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IAODAPCA Counselor, CADAC

Name & Main Office Address: Liza Simon-Roper
215 N. Milwaukee Avenue
Lake Villa, IL 60046

Phone: (847) 245-6547

Fax: (847) 245-6714

Email: lsroper@kidshopeunited.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW, WI LCSW, ATSA Member



Sex Offender Management Board Approved Provider List - By County



McHenry

Marcy Pritzen, LCSW

Name & Main Office Address: Marcy Pritzen, LCSW
3295 N. Arlington Heights Rd, Suite 103
Arlington Heights, IL 60004

Phone: (847) 636-6364
Fax: (847) 398-6595
Email: mpritzen@mindspring.com
Language(s): English
Licenses: IL LCSW #149-005331

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Northwest Treatment Associates

Name & Main Office Address: Carol Fetzner
645 McHenry Avenue
Woodstock, IL 60098

Phone: (815) 337-1234
Fax: (815) 337-5653
Email:
Language(s): English
Licenses: IL LCPC #180-000371, NCC 27767

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Patrick C. Littlejohn, MA, NCC, LCPC
645 McHenry Avenue
Woodstock, IL 60098

Phone: (815) 337-1234
Fax: (847) 608-8570
Email: pclittlejohn@hotmail.com
Language(s): English
Licenses: IL LCPC, National Certified Counselor, Clinical Member-ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Bonnie E. Marable
645 McHenry Avenue
Woodstock, IL 60098

Phone: (815) 337-1234
Fax: (847) 608-8572
Email:
Language(s): English
Licenses: IL LCP #071-006480; IN Psychologist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Cheryl R. Runion
1185 Dundee Avenue, E-1
Elgin, IL 60120

Phone: (847) 608-8570
Fax: (847) 608-8576
Email: j.runion@comcast.net
Language(s): English
Licenses: IL LCPC, CADC, CCJP, NCC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Dr. Jim Webster, PsyD
1185 Dundee Avenue, E-1
Elgin, IL 60120

Phone: (815) 337-1234
Fax: (815) 337-5653
Email:
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

RITAS Ministry

Name & Main Office Address: Judith "Jude" C. Skallerup
325 E. Galena
Aurora, IL 60505

Phone: (630) 966-0252
Fax: (630) 966-0005
Email:
Language(s): English
Licenses: IL LCPC-180-004615, CSOTS

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



McHenry

Ronald B. Baron, M.D.

Name & Main Office Address: Ronald B. Baron, M.D.
2120 Sheridan Road
Highland Park, IL 60035-2404

Phone: (847) 432-7007

Fax: (847) 432-7034

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: Certified Forensic Psychiatrist

Welch, Psy.D., William H.

Name & Main Office Address: William H. Welch, Psy.D.
810 E. State Street, Suite 304
Rockford, IL 61104

Phone: (815) 316-7604

Fax: (815) 316-7614

Email: neuropsychd@gmail.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, ATSA Clinical Member, IL ATSA, CSOTS

William "Kip" Hillman, Psy.D.

Name & Main Office Address: William "Kip" Hillman, Psy.D.
4064 N. Lincoln, #290
Chicago, IL 60618

Phone: (312) 933-0060

Fax: (773) 989-0275

Email: kiphillman@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Psychology 071-003686

McLean

ABC Counseling and Family Services

Name & Main Office Address: Lynn Willard, MA, MSW
705 E. Lincoln
Normal, IL 61761

Phone: (309) 451-9495

Fax: (309) 451-9404

Email: lwillard@abccounseling.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-004238

Art Therapy and Counseling Services

Name & Main Office Address: Laurie A. Cox
101 E. College Avenue, Suite D
Normal, IL 61761

Phone: (309) 452-5326

Fax: (309) 452-5356

Email: coxlaurie@msn.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, CADAC

Bohlen & Associates, SC

Name & Main Office Address: Joseph G. Bohlen, MD, Ph.D.
3001 Spring Mill Drive, Suite D
Springfield, IL 62704

Phone: (217) 546-3100

Fax: (217) 546-3284

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Physicians & Surgeons



Sex Offender Management Board Approved Provider List - By County



McLean

BroMenn Hospital-Twin Cities Behavioral Health

Name & Main Office Address: Brian Heatherton, Ph.D.
202 E. Locast Street
Bloomington, IL 61701

Phone: (309) 268-3542
Fax: (309) 268-2323
Email: bheatherto@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: LCP- IL and IN, Certified Substance Abuse Professional, Affiliate Association for Treatment of the Sexual Abuser

BroMenn Medical Group - Twin Cities Behavioral Health

Name & Main Office Address: Cheryl L. Miller
403 W. Virginia
Normal, IL 61761

Phone: (309) 268-3529
Fax: (309) 268-2323
Email: cmiller@bromenn.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP #071-006052, clinical member APA, member of ATSA, member AASECT

Community Resource and Counseling Center

Name & Main Office Address: Laurelyn Cropek
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: crcc@illicom.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW-149-005667

Name & Main Office Address: Laurie A. Gilbert
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: lgilbert@4crcc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW-149-010484

Name & Main Office Address: Christine Mayer
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: ccrc@illicom.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW-149.009275

Name & Main Office Address: Jeffrey C. Reynolds
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: jreynolds@4crcc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC #180-004199



Sex Offender Management Board Approved Provider List - By County



McLean

Lutheran Social Services of Illinois

Name & Main Office Address: Dee Ann Foss
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x271
Fax: (309) 671-0503
Email: deeanne.foss-reimers@lssi.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Yvonne Wojtalik
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x245
Fax: (309) 671-0503
Email: yvonne.wojtalik@lssi.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Onarga Academy

Name & Main Office Address: Rebecca Cunningham
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: rcunnin@nexus-ona.org
Language(s): English
Licenses: IL LCPC #180-001150

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: William D. Featherstone
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: bfeathe@nexus-ona.org
Language(s): English
Licenses:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Douglas C. Gossett, M.A., LCPC
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: dgosset@nexus-ona.org
Language(s): English
Licenses: IL LCPC #180-005298

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Jamie Kozma
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: jkozma@nexus-ona.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Bill Mitchell
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: wmitche@nexus-ona.org
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



McLean

Onarga Academy

Name & Main Office Address: Karen Robertie
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: krobert@nexus-ona.org
Language(s): English
Licenses: IL LCPC 180-005314

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Michael D. Simpson
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: msimpso@nexus-ona.org
Language(s): English
Licenses: IL LCPC 180-005921

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Tricia Renee St. Pierre
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: tstpier@nexus-ona.org
Language(s): English
Licenses: NCC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Ryan Weidenbenner
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: rweiden@nexus-ong.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Timothy E. White
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: twhite@nexus-ona.org
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

P. F. Dover Counseling, LLC

Name & Main Office Address: James R. Seavey
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 495-4924
Fax: (309) 495-4993
Email: jspfdovercounseling@yahoo.com
Language(s): English
Licenses: IL LCPC #180-001434

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Scott A. Smith
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 477-2278
Fax: (309) 477-3113
Email: sspfdovercounseling@yahoo.com
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



McLean

Seth Robert Hatlelid, Psy.D

Name & Main Office Address: Seth Robert Hatlelid, Psy.D.
403 W. Virginia
Normal, IL 67161

Phone: (309) 268-2112
Fax: (309) 268-2323
Email: napkins@mac.com
Language(s): English
Licenses: IL LCP

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Menard

Bohlen & Associates, SC

Name & Main Office Address: Joseph G. Bohlen, MD, Ph.D.
3001 Spring Mill Drive, Suite D
Springfield, IL 62704

Phone: (217) 546-3100
Fax: (217) 546-3284
Email:
Language(s): English
Licenses: IL Physicians & Surgeons

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Clinical Systems, Inc.

Name & Main Office Address: Louis M. Douglas
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142
Fax:
Email: ldouglas@insightbb.com
Language(s): English
Licenses: LPC, CADC, CCJP, MISA II

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Michael G. Howie
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142
Fax: (217) 529-2174
Email: mhowie1@earthlink.net
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Karen L. Streight
3151 Butler
Springfield, IL 62703

Phone: (271) 529-2142
Fax: (217) 529-2174
Email: clinicalsystems@yahoo.com
Language(s): English
Licenses: IL LCPC #180-003070

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Gregory S. Viniard

Name & Main Office Address: Gregory S. Viniard
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142
Fax: (217) 529-2174
Email:
Language(s): English
Licenses: IL LCPC #180-003061, Clinically Certified
Forensic Counselor #F18393, Clinically
Certified DV Counselor #F18394

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Mercer

Caparulo and Associates

Name & Main Office Address: Richard Johnson, MS.Ed., DABFE
1622 38th Street, Suite 108
Rock Island, IL 61201

Phone: (309) 788-6030
Fax: (309) 793-5130
Email: rjohnson@qconline.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: Board Certified Forensic Examiner, DABFE
#13317

Illinois Youth Center (IYC) - Kewanee

Name & Main Office Address: David Allred (IDOC)
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC #180-001084

Name & Main Office Address: Stacey Andrews
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW

Name & Main Office Address: Victor A. Kersey
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Name & Main Office Address: Katrina Maddox
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email: psychgirl75@sbcglobal.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LPC #178-004175; NCC-National Certified Counselor

Name & Main Office Address: Robert E. Olt
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: NCC; LCPC

Name & Main Office Address: Lisa L. Potter
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email: lpotter9@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: MS, MHP



Sex Offender Management Board Approved Provider List - By County



Mercer

Illinois Youth Center (IYC) - Kewanee

Name & Main Office Address: Kenneth G. Queen
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651

Fax: (309) 852-3515

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LPC 178-004103

Name & Main Office Address: Petrita Salazar
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651

Fax: (309) 852-3515

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Name & Main Office Address: Jeffrey P. L. Sim
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651

Fax: (309) 852-3515

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-007028

Robert Young Center for Community Mental Health

Name & Main Office Address: Lisa Curry
4600 3rd Street
Moline, IL 61265

Phone: (309) 779-2038

Fax: (309) 779-2167

Email: currylctrinityqc.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-149-005922, LISW-Iowa

Name & Main Office Address: Scott Stange
4600 3rd Street
Moline, IL 61265

Phone: (309) 779-2031

Fax: (309) 779-2167

Email: stange@trinityqc.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW, LISW, Clinical Member ATSA

Monroe

Alternatives Counseling, Inc.

Name & Main Office Address: Donya Adkerson, MA
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085

Fax: (618) 288-8959

Email: donya2@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-000271



Sex Offender Management Board Approved Provider List - By County



Monroe

Alternatives Counseling, Inc.

Name & Main Office Address: Bethany A. Munge, M.A., Q.M.H.P.
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085 x202
Fax: (618) 288-8959

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Email:
Language(s): English
Licenses: None

Daniel J. Cuneo, Ph.D.

Name & Main Office Address: Daniel J. Cuneo, Ph.D.
2217 W. Main
Belleville, IL 62226

Phone: (618) 277-5498
Fax: (618) 235-4316
Email: dcuneo@charter.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL 071-002307 & MO Psychologist

Provident Counseling

Name & Main Office Address: Caroline M. Foss
2650 Olive Street
St. Louis, MO 63103

Phone: (314) 371-6500 x1127
Fax: (314) 371-6508
Email: cfoss@providentc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Name & Main Office Address: James M. Moll
2650 Olive Street
St. Louis, MO 63103

Phone: (314) 802-2598
Fax: (314) 371-6508
Email: jm@providentc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Name & Main Office Address: Margaret A. Schicker
2650 Olive Street
St. Louis, MO 63103

Phone: (314) 371-6500
Fax: (314) 371-6508
Email: margaret.schicker@providentc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: LCSW

Montgomery

Alternatives Counseling, Inc.

Name & Main Office Address: Donya Adkerson, MA
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085
Fax: (618) 288-8959
Email: donya2@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC-180-000271



Sex Offender Management Board Approved Provider List - By County



Montgomery

Alternatives Counseling, Inc.

Name & Main Office Address: Bethany A. Munge, M.A., Q.M.H.P.
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085 x202
Fax: (618) 288-8959

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Email:
Language(s): English
Licenses: None

Bohlen & Associates, SC

Name & Main Office Address: Joseph G. Bohlen, MD, Ph.D.
3001 Spring Mill Drive, Suite D
Springfield, IL 62704

Phone: (217) 546-3100
Fax: (217) 546-3284

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Email:
Language(s): English
Licenses: IL Physicians & Surgeons

Clinical Systems, Inc.

Name & Main Office Address: Louis M. Douglas
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142
Fax:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Email: ldouglas@insightbb.com
Language(s): English
Licenses: LPC, CADC, CCJP, MISA II

Name & Main Office Address: Michael G. Howie
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142
Fax: (217) 529-2174

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Email: mhowie1@earthlink.net
Language(s): English
Licenses: IL LCPC

Name & Main Office Address: Karen L. Streight
3151 Butler
Springfield, IL 62703

Phone: (271) 529-2142
Fax: (217) 529-2174

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Email: clinicalsystems@yahoo.com
Language(s): English
Licenses: IL LCPC #180-003070

Darlene M. Bushue, M.A., LCPC

Name & Main Office Address: #Error

Phone: (618) 444-7736

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Fax:
Email:
Language(s): English
Licenses: IL LCPC 180-004485



Sex Offender Management Board Approved Provider List - By County



Montgomery

Effingham County Probation Office

Name & Main Office Address: Sandy Taylor, MS, LCPC
106 N. Third Street
Effingham, IL 62401-3456

Phone: (217) 347-7931
Fax: (217) 347-2001
Email: sandy_taylor9@yahoo.com
Language(s): English
Licenses: IL LCPC #180-005527

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Gregory S. Viniard

Name & Main Office Address: Gregory S. Viniard
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142
Fax: (217) 529-2174
Email:
Language(s): English
Licenses: IL LCPC #180-003061, Clinically Certified
Forensic Counselor #F18393, Clinically
Certified DV Counselor #F18394

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Morgan

Bohlen & Associates, SC

Name & Main Office Address: Joseph G. Bohlen, MD, Ph.D.
3001 Spring Mill Drive, Suite D
Springfield, IL 62704

Phone: (217) 546-3100
Fax: (217) 546-3284
Email:
Language(s): English
Licenses: IL Physicians & Surgeons

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Clinical Systems, Inc.

Name & Main Office Address: Louis M. Douglas
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142
Fax:
Email: ldouglas@insightbb.com
Language(s): English
Licenses: LPC, CADC, CCJP, MISA II

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Michael G. Howie
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142
Fax: (217) 529-2174
Email: mhowie1@earthlink.net
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Karen L. Streight
3151 Butler
Springfield, IL 62703

Phone: (271) 529-2142
Fax: (217) 529-2174
Email: clinicalsystems@yahoo.com
Language(s): English
Licenses: IL LCPC #180-003070

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Morgan

Gregory S. Viniard

Name & Main Office Address: Gregory S. Viniard
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142

Fax: (217) 529-2174

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-003061, Clinically Certified
Forensic Counselor #F18393, Clinically
Certified DV Counselor #F18394

Midwest Counseling

Name & Main Office Address: Bryan Denure
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885

Fax:

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LPC #180-005002, CRADC

Name & Main Office Address: Keir L. Goatley
917 Clocktower Dr. #420
Springfield, IL 62704

Phone: (217) 726-8744

Fax:

Email: kgoatley@ameritech.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-#180-004321, (IDPR), CCBT, ATLSA,
IL-ATSA

Name & Main Office Address: Gil Pilapil
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885

Fax:

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Terry D. Campbell, MS

Name & Main Office Address: Terry D. Campbell, MS
P.O. Box 17
Sherman, IL 62684

Phone: (217) 566-2552

Fax: (217) 566-2552

Email: campbell@warpsnet.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LPC-#180-005797

Moultrie

Cokley, Sunderland & Cokley

Name & Main Office Address: Robert L. Cokley, Ph.D.
348 West Prairie Avenue, Suite
Decatur, IL 62522

Phone: (217) 422-0053

Fax: (217) 422-0374

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW- #149-000865, Doctorate



Sex Offender Management Board Approved Provider List - By County



Ogle

Alliances Counseling Services

Name & Main Office Address: Ronelle Allen
119 W. First Street, Suite 110
Dixon, IL 61021

Phone: (815) 285-3073
Fax: (815) 285-3103
Email: alliances@cin.net
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Brian Smith
119 W. First Street, Suite 110
Dixon, IL 61021

Phone: (815) 285-3073
Fax: (815) 285-3103
Email: alliances@cin.net
Language(s): English
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Braden Counseling Center

Name & Main Office Address: Danielle Calsyn
2580 DeKalb Avenue
Sycamore, IL 60178

Phone: (815) 787-9000
Fax: (815) 787-9015
Email: dcalsyn@frontiernet.net
Language(s): English
Licenses: CADC #21278

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Community Counseling Center, Ltd.

Name & Main Office Address: Jeffrey A. Martin
666 Russell Court, Suite 105
Woodstock, IL 60098

Phone: (815) 338-7749
Fax: (815) 338-7728
Email: ccc@imaxx.net
Language(s): English
Licenses: IL LCSW 149-003373

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Family Services Agency of DeKalb County, Inc.

Name & Main Office Address: Kathleen M. Alberts, MSW, LCPC
14 Health Services Drive
DeKalb, IL 60115

Phone: (815) 758-8618
Fax: (815) 758-7569
Email:
Language(s): English
Licenses: IL LCPC #180-004462; Certified Sex Offender Tx Specialist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Family, Divorce & Mediation of Ogle County

Name & Main Office Address: Kathleen M. Alberts, MSW, LCPC
1500 West Lincoln Avenue
Rochelle, IL 61068

Phone: (815) 562-8818
Fax: (815) 562-8818
Email:
Language(s): English
Licenses: IL LCPC #180-004462; Certified Sex Offender Tx Specialist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Ogle

Forensic Psych Associates, Ltd.

Name & Main Office Address: Robert H. Gordon, Ph.D.
203 N. LaSalle Street, #2100
Chicago, IL 60601

Phone: (312) 917-1610
Fax: (608) 756-5174
Email: rgordon@forensicpsych.com
Language(s): English
Licenses: IL LCP

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Glenwood Testing Center

Name & Main Office Address: Frank E. Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-8133
Fax: (815) 968-4656
Email: fec@juno.com
Language(s): English
Licenses: IL LCP #071-002590

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Kyle Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-5342
Fax: (815) 968-4656
Email: drcushing@juno.com
Language(s): English
Licenses: IL LCP, Consulting Forensic Examiner

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Jeffrey B. Sundberg

Name & Main Office Address: Jeffrey B. Sundberg
P. O. Box 17044, 610 A East State Street
Rockford, IL 61110

Phone: (815) 332-8342
Fax: (815) 332-8342
Email:
Language(s): English
Licenses: IL LCSW #149-003876, ACSW, ATSA Member

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Welch, Psy.D., William H.

Name & Main Office Address: William H. Welch, Psy.D.
810 E. State Street, Suite 304
Rockford, IL 61104

Phone: (815) 316-7604
Fax: (815) 316-7614
Email: neuropsych@gmail.com
Language(s): English
Licenses: IL LCP, ATSA Clinical Member, IL ATSA, CSOTS

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Peoria

Advanced Behavioral Health

Name & Main Office Address: W. Christopher Tolen, Psy.D.
2101 Windish Drive, Suite 100
Galesburg, IL 61401

Phone: (309) 342-6852
Fax: (309) 344-0071
Email: drtolen@byu.net
Language(s): English
Licenses: IL LCP #071-006296

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Peoria

Art Therapy and Counseling Services

Name & Main Office Address: Laurie A. Cox
101 E. College Avenue, Suite D
Normal, IL 61761

Phone: (309) 452-5326
Fax: (309) 452-5356
Email: coxlaurie@msn.com
Language(s): English
Licenses: IL LCPC, CADC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Bohlen & Associates, SC

Name & Main Office Address: Joseph G. Bohlen, MD, Ph.D.
3001 Spring Mill Drive, Suite D
Springfield, IL 62704

Phone: (217) 546-3100
Fax: (217) 546-3284
Email:
Language(s): English
Licenses: IL Physicians & Surgeons

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Camelot Community Care

Name & Main Office Address: Tracey Hutchison
5901 N. Prospect Road
Peoria, IL 61614

Phone: (309) 342-7548
Fax:
Email: twestbay@hotmail.com
Language(s): English
Licenses: Direct Child Welfare Services Employee

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Lutheran Social Services of Illinois

Name & Main Office Address: Dee Ann Foss
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x271
Fax: (309) 671-0503
Email: deeanne.foss-reimers@lssi.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Yvonne Wojtalik
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x245
Fax: (309) 671-0503
Email: yvonne.wojtalik@lssi.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Lynn Irving-Klass

Name & Main Office Address: Lynn Irving-Klass
2001 W. Willow Knolls Road, Suite 205A
Peoria, IL 61614

Phone: (309) 693-9003
Fax: (309) 693-1761
Email: woshrink@msn.com
Language(s): English
Licenses: IL LCPC, NCC

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Peoria

Midwest Counseling

Name & Main Office Address: Bryan Denure
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885

Fax:

Email:

Language(s): English

Licenses: IL LPC #180-005002, CRADC

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Keir L. Goatley
917 Clocktower Dr. #420
Springfield, IL 62704

Phone: (217) 726-8744

Fax:

Email: kgoatley@ameritech.net

Language(s): English

Licenses: IL LCPC #180-004321, (IDPR), CCBT, ATLSA,
IL-ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Gil Pilapil
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885

Fax:

Email:

Language(s): English

Licenses: None

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

P. F. Dover Counseling, LLC

Name & Main Office Address: James R. Seavey
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 495-4924

Fax: (309) 495-4993

Email: jspfdovercounseling@yahoo.com

Language(s): English

Licenses: IL LCPC #180-001434

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Scott A. Smith
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 477-2278

Fax: (309) 477-3113

Email: sspfdovercounseling@yahoo.com

Language(s): English

Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Resolutions Unlimited

Name & Main Office Address: Michael S. Shear, Psy.D.
456 Fulton Street, Suite 101
Peoria, IL 61602

Phone: (309) 673-9385

Fax: (309) 673-9446

Email:

Language(s): English

Licenses: IL LCPC #180-004648

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Peoria

William "Kip" Hillman, Psy.D.

Name & Main Office Address: William "Kip" Hillman, Psy.D.
4064 N. Lincoln, #290
Chicago, IL 60618

Phone: (312) 933-0060
Fax: (773) 989-0275
Email: kiphillman@yahoo.com
Language(s): English
Licenses: IL Psychology 071-003686

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Perry

Alternatives Counseling, Inc.

Name & Main Office Address: Donya Adkerson, MA
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085
Fax: (618) 288-8959
Email: donya2@aol.com
Language(s): English
Licenses: IL LCPC-180-000271

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Bethany A. Munge, M.A., Q.M.H.P.
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085 x202
Fax: (618) 288-8959
Email:
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Kosmicki, Ph.D., Frank X.

Name & Main Office Address: Frank X. Kosmicki, Ph.D.
231 W. Main Street
Carbondale, IL 62901

Phone: (618) 203-6730
Fax: (618) 529-3171
Email:
Language(s): English
Licenses: IL LCP #071-006668

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Michael E. Althoff, Ph.D.

Name & Main Office Address: Michael E. Althoff, Ph.D.
201 E. Main, Suite 3D
Carbondale, IL 62901

Phone: (618) 549-3587
Fax: (618) 549-2695
Email: mealthoff@aol.com
Language(s): English
Licenses: IL LCP, IL Clinical Member - ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Piatt

Cokley, Sunderland & Cokley

Name & Main Office Address: Robert L. Cokley, Ph.D.
348 West Prairie Avenue, Suite
Decatur, IL 62522

Phone: (217) 422-0053
Fax: (217) 422-0374
Email:
Language(s): English
Licenses: IL LCSW- #149-000865, Doctorate

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Piatt

Community Resource and Counseling Center

Name & Main Office Address: Laurelyn Cropek
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: crcc@illicom.net
Language(s): English
Licenses: IL LCSW-149-005667

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Laurie A. Gilbert
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: lgilbert@4crcc.org
Language(s): English
Licenses: IL LCSW-149-010484

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Christine Mayer
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: ccrc@illicom.net
Language(s): English
Licenses: IL LCSW-149.009275

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Jeffrey C. Reynolds
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302
Fax: (217) 379-4304
Email: jreynolds@4crcc.org
Language(s): English
Licenses: IL LCPC #180-004199

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Kleppin, MS.Ed., LCPC, CADC, Kleppin

Name & Main Office Address: Michael Kleppin, MS.Ed., LCPC, CADC
P. O. Box 416
Saboy, IL 61874

Phone: (217) 398-0413
Fax: (217) 239-6616
Email:
Language(s): English
Licenses: IL LCPC-#180-005001, CADC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Kling, Joanna M.Ed., LCPC

Name & Main Office Address: Joanna Kling, M.Ed., LCPC
507 W. Springfield Avenue
Urbana, IL 61801

Phone: (217) 344-4722
Fax: (217) 344-4733
Email: jokling611@insightbb.com
Language(s): English
Licenses: IL LCPC, NBCC

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Pike

Living Hope

Name & Main Office Address: Michael Schneider, Ph.D.
2272 Chestnut
Quincy, IL 62301

Phone: (217) 641-0945

Fax: (217) 641-0945

Email: mikejoe@adams.net

Services Provided:

Evaluations ? Yes
Treatment ? Yes
Adult ? No
Juvenile ? Yes

Provider Meets the following qualifications:

All treatment provider qualifications? Yes
All evaluation provider qualifications? Yes
All applicant attestation qualifications? Yes

Language(s): English

Licenses: IL LPC #071-005940, Missouri #PY 01367

Pope

First Judicial Circuit of Illinois-Probation & Court Services

Name & Main Office Address: Marlynn A. Frailey
201 W. Main
Marion, IL 62959

Phone: (618) 993-1840

Fax: (618) 993-1865

Email: mfrailey@firstcircuitprobation.com

Services Provided:

Evaluations ? Yes
Treatment ? No
Adult ? Yes
Juvenile ? Yes

Provider Meets the following qualifications:

All treatment provider qualifications? No
All evaluation provider qualifications? Yes
All applicant attestation qualifications? Yes

Language(s): English

Licenses: CAC; IAODAPCA #6771

Gary Lemmon and Associates, Inc.

Name & Main Office Address: Gary L. Lemmon
904 E. Main
Norris City, IL 62869

Phone: (618) 378-3010

Fax: (618) 378-2308

Email: glemmon@shawneelink.net

Services Provided:

Evaluations ? Yes
Treatment ? Yes
Adult ? Yes
Juvenile ? Yes

Provider Meets the following qualifications:

All treatment provider qualifications? Yes
All evaluation provider qualifications? Yes
All applicant attestation qualifications? Yes

Language(s): English

Licenses: IL LCSW-#149-00164, Clinical Member ATSA

Michael E. Althoff, Ph.D.

Name & Main Office Address: Michael E. Althoff, Ph.D.
201 E. Main, Suite 3D
Carbondale, IL 62901

Phone: (618) 549-3587

Fax: (618) 549-2695

Email: mealthoff@aol.com

Services Provided:

Evaluations ? Yes
Treatment ? Yes
Adult ? Yes
Juvenile ? Yes

Provider Meets the following qualifications:

All treatment provider qualifications? Yes
All evaluation provider qualifications? Yes
All applicant attestation qualifications? Yes

Language(s): English

Licenses: IL LCP, IL Clinical Member - ATSA

Pulaski

Delta Center, Inc.

Name & Main Office Address: Wendy Ice
1400 Commercial Avenue
Cairo, IL 62914

Phone: (618) 734-2665 x258

Fax: (618) 734-1999

Email: wendie_ice@yahoo.com

Services Provided:

Evaluations ? No
Treatment ? Yes
Adult ? Yes
Juvenile ? No

Provider Meets the following qualifications:

All treatment provider qualifications? Yes
All evaluation provider qualifications? No
All applicant attestation qualifications? Yes

Language(s): English

Licenses: None

First Judicial Circuit of Illinois-Probation & Court Services

Name & Main Office Address: Marlynn A. Frailey
201 W. Main
Marion, IL 62959

Phone: (618) 993-1840

Fax: (618) 993-1865

Email: mfrailey@firstcircuitprobation.com

Services Provided:

Evaluations ? Yes
Treatment ? No
Adult ? Yes
Juvenile ? Yes

Provider Meets the following qualifications:

All treatment provider qualifications? No
All evaluation provider qualifications? Yes
All applicant attestation qualifications? Yes

Language(s): English

Licenses: CAC; IAODAPCA #6771



Sex Offender Management Board Approved Provider List - By County



Pulaski

Massac County Mental Health

Name & Main Office Address: Patricia Gillespie
206 W. 5th Street
Metropolis, IL 62960

Phone: (618) 524-9368

Fax: (618) 524-9551

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: Sexual Abuse Treatment Counselor, BS, MHP,
17 yrs experience

Name & Main Office Address: Yvonne J. Rath
206 W. 5th Street
Metropolis, IL 62960

Phone: (618) 524-9368

Fax: (618) 524-9551

Email: mcmh@hcis.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, NCC, MAC, CCJS, PCGC, CARF,
Medicaid, Child Welfare, Substance Abuse -
Agency, Individual

Michael E. Althoff, Ph.D.

Name & Main Office Address: Michael E. Althoff, Ph.D.
201 E. Main, Suite 3D
Carbondale, IL 62901

Phone: (618) 549-3587

Fax: (618) 549-2695

Email: mealthoff@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, IL Clinical Member - ATSA

Putnam

Art Therapy and Counseling Services

Name & Main Office Address: Laurie A. Cox
101 E. College Avenue, Suite D
Normal, IL 61761

Phone: (309) 452-5326

Fax: (309) 452-5356

Email: coxlaurie@msn.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, CADC

P. F. Dover Counseling, LLC

Name & Main Office Address: James R. Seavey
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 495-4924

Fax: (309) 495-4993

Email: jspfdovercounseling@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-001434

Name & Main Office Address: Scott A. Smith
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 477-2278

Fax: (309) 477-3113

Email: sspfdovercounseling@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC



Sex Offender Management Board Approved Provider List - By County



Randolph

Alternatives Counseling, Inc.

Name & Main Office Address: Donya Adkerson, MA
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085
Fax: (618) 288-8959
Email: donya2@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC-180-000271

Name & Main Office Address: Bethany A. Munge, M.A., Q.M.H.P.
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085 x202
Fax: (618) 288-8959
Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Chester Mental Health Center

Name & Main Office Address: Richard D. Johnson, Ph.D.
1315 Lehman Drive
Chester, IL 62233

Phone: (618) 826-4571
Fax:
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL CP; ILCPC; Nationally Certified Counselor, Certified Clinical Mental Health Counselor

Name & Main Office Address: Christopher E. Leonard, LCSW
P.O. Box 31
Chester, IL 62233

Phone: (618) 826-4571
Fax: (618) 826-3229
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW #149-006035, MO LCSW #004849

Name & Main Office Address: Carole Metzger, LCSW
P.O. Box 31
Chester, IL 62233

Phone: (618) 615-1687
Fax:
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW #149-008319

Name & Main Office Address: James C. Morris
1315 Lehman Drive
Chester, IL 62233

Phone: (618) 826-4571
Fax: (618) 826-3229
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: LCSW #149-006336

Daniel J. Cuneo, Ph.D.

Name & Main Office Address: Daniel J. Cuneo, Ph.D.
2217 W. Main
Belleville, IL 62226

Phone: (618) 277-5498
Fax: (618) 235-4316
Email: dcuneo@charter.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL 071-002307 & MO Psychologist



Sex Offender Management Board Approved Provider List - By County



Randolph

Kosmicki, Ph.D., Frank X.

Name & Main Office Address: Frank X. Kosmicki, Ph.D.
231 W. Main Street
Carbondale, IL 62901

Phone: (618) 203-6730

Fax: (618) 529-3171

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-006668

Michael E. Althoff, Ph.D.

Name & Main Office Address: Michael E. Althoff, Ph.D.
201 E. Main, Suite 3D
Carbondale, IL 62901

Phone: (618) 549-3587

Fax: (618) 549-2695

Email: mealthoff@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, IL Clinical Member - ATSA

Provident Counseling

Name & Main Office Address: Caroline M. Foss
2650 Olive Street
St. Louis, MO 63103

Phone: (314) 371-6500 x1127

Fax: (314) 371-6508

Email: cfoss@providentc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Name & Main Office Address: James M. Moll
2650 Olive Street
St. Louis, MO 63103

Phone: (314) 802-2598

Fax: (314) 371-6508

Email: jm@providentc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Name & Main Office Address: Margaret A. Schicker
2650 Olive Street
St. Louis, MO 63103

Phone: (314) 371-6500

Fax: (314) 371-6508

Email: margaret.schicker@providentc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: LCSW

Richland

Brown Counseling & Consulting

Name & Main Office Address: Jeffrey R. Brown
2622 Washington Avenue
Vincennes, IN 47591

Phone: (812) 887-5431

Fax: (812) 886-3010

Email: lazlo81@charter.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: ACSW; LCSW, IL #148-008300 & IN #34001119A; CADIC III; ATSA



Sex Offender Management Board Approved Provider List - By County



Richland

Gary Lemmon and Associates, Inc.

Name & Main Office Address: Gary L. Lemmon
904 E. Main
Norris City, IL 62869

Phone: (618) 378-3010

Fax: (618) 378-2308

Email: glemmon@shawneelink.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-#149-00164, Clinical Member ATSA

Rock Island

Caparulo and Associates

Name & Main Office Address: Richard Johnson, MS.Ed., DABFE
1622 38th Street, Suite 108
Rock Island, IL 61201

Phone: (309) 788-6030

Fax: (309) 793-5130

Email: rjohnson@qconline.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: Board Certified Forensic Examiner, DABFE
#13317

Kirk Witherspoon, Ph.D.

Name & Main Office Address: Kirk Witherspoon, Ph.D.
722 - 23rd Avenue Court
Moline, IL 61265-4624

Phone: (309) 762-2922

Fax: (309) 762-8394

Email: kirkwitherspoon@mchsi.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP 71-2839

Psychology Associates

Name & Main Office Address: W. David McEchron
4455 E. 56th Street
Davenport, IA 52807

Phone: (563) 355-2577

Fax: (563) 355-4015

Email: mcechronw@genesishhealth.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English , Spanish

Licenses: IL LCP-#071-006817; CPQ #144

Robert Young Center for Community Mental Health

Name & Main Office Address: Lisa Curry
4600 3rd Street
Moline, IL 61265

Phone: (309) 779-2038

Fax: (309) 779-2167

Email: currylctrinityqc.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-149-005922, LISW-Iowa

Name & Main Office Address: Scott Stange
4600 3rd Street
Moline, IL 61265

Phone: (309) 779-2031

Fax: (309) 779-2167

Email: stange@trinityqc.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW, LISW, Clinical Member ATSA



Sex Offender Management Board Approved Provider List - By County



Rock Island

Southpark Psychology at Illini

Name & Main Office Address: James D. Ray
1314 Tenth Street
Silvis, IL 61282

Phone: (309) 792-6563

Fax: (309) 792-6430

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

William "Kip" Hillman, Psy.D.

Name & Main Office Address: William "Kip" Hillman, Psy.D.
4064 N. Lincoln, #290
Chicago, IL 60618

Phone: (312) 933-0060

Fax: (773) 989-0275

Email: kiphillman@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Psychology 071-003686

Saline

First Judicial Circuit of Illinois-Probation & Court Services

Name & Main Office Address: Marlynn A. Frailey
201 W. Main
Marion, IL 62959

Phone: (618) 993-1840

Fax: (618) 993-1865

Email: mfrailey@firstcircuitprobation.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: CAC; IAODAPCA #6771

Gary Lemmon and Associates, Inc.

Name & Main Office Address: Gary L. Lemmon
904 E. Main
Norris City, IL 62869

Phone: (618) 378-3010

Fax: (618) 378-2308

Email: glemmon@shawneelink.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-#149-00164, Clinical Member ATSA

Kosmicki, Ph.D., Frank X.

Name & Main Office Address: Frank X. Kosmicki, Ph.D.
231 W. Main Street
Carbondale, IL 62901

Phone: (618) 203-6730

Fax: (618) 529-3171

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-006668

Michael E. Althoff, Ph.D.

Name & Main Office Address: Michael E. Althoff, Ph.D.
201 E. Main, Suite 3D
Carbondale, IL 62901

Phone: (618) 549-3587

Fax: (618) 549-2695

Email: mealthoff@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, IL Clinical Member - ATSA



Sex Offender Management Board Approved Provider List - By County



Sangamon

Art Therapy and Counseling Services

Name & Main Office Address: Laurie A. Cox
101 E. College Avenue, Suite D
Normal, IL 61761

Phone: (309) 452-5326
Fax: (309) 452-5356
Email: coxlaurie@msn.com
Language(s): English
Licenses: IL LCPC, CADC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Bohlen & Associates, SC

Name & Main Office Address: Joseph G. Bohlen, MD, Ph.D.
3001 Spring Mill Drive, Suite D
Springfield, IL 62704

Phone: (217) 546-3100
Fax: (217) 546-3284
Email:
Language(s): English
Licenses: IL Physicians & Surgeons

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

BroMenn Hospital-Twin Cities Behavioral Health

Name & Main Office Address: Brian Heatherton, Ph.D.
202 E. Locast Street
Bloomington, IL 61701

Phone: (309) 268-3542
Fax: (309) 268-2323
Email: bheatherto@aol.com
Language(s): English
Licenses: LCP- IL and IN, Certified Substance Abuse Professional, Affiliate Association for Treatment of the Sexual Abuser

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

BroMenn Medical Group - Twin Cities Behavioral Health

Name & Main Office Address: Chery L. Miller
403 W. Virginia
Normal, IL 61761

Phone: (309) 268-3529
Fax: (309) 268-2323
Email: cmiller@bromenn.org
Language(s): English
Licenses: IL LCP #071-006052, clinical member APA, member of ATSA, member AASECT

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Clinical Systems, Inc.

Name & Main Office Address: Louis M. Douglas
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142
Fax:
Email: ldouglas@insightbb.com
Language(s): English
Licenses: LPC, CADC, CCJP, MISA II

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Michael G. Howie
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142
Fax: (217) 529-2174
Email: mhowie1@earthlink.net
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Sangamon

Clinical Systems, Inc.

Name & Main Office Address: Karen L. Streight
3151 Butler
Springfield, IL 62703

Phone: (271) 529-2142
Fax: (217) 529-2174
Email: clinicalsystems@yahoo.com
Language(s): English
Licenses: IL LCPC #180-003070

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Gregory S. Viniard

Name & Main Office Address: Gregory S. Viniard
3151 Butler
Springfield, IL 62703

Phone: (217) 529-2142
Fax: (217) 529-2174
Email:
Language(s): English
Licenses: IL LCPC #180-003061, Clinically Certified
Forensic Counselor #F18393, Clinically
Certified DV Counselor #F18394

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Midwest Counseling

Name & Main Office Address: Bryan Denure
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885
Fax:
Email:
Language(s): English
Licenses: IL LPC #180-005002, CRADC

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Name & Main Office Address: Keir L. Goatley
917 Clocktower Dr. #420
Springfield, IL 62704

Phone: (217) 726-8744
Fax:
Email: kgoatley@ameritech.net
Language(s): English
Licenses: IL LCPC #180-004321, (IDPR), CCBT, ATLSA,
IL-ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Gil Pilapil
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885
Fax:
Email:
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Psychiatric Associates of Central Illinois

Name & Main Office Address: Brian Heatherton, Ph.D.
1124 S. Sixth Street
Springfield, IL 62703

Phone: (309) 268-3542
Fax: (309) 268-2323
Email: bheatherto@aol.com
Language(s): English
Licenses: LCP- IL and IN, Certified Substance Abuse
Professional, Affiliate Association for
Treatment of the Sexual Abuser

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Sangamon

Psychological & Counseling Center

Name & Main Office Address: Ronald Matthew
N7193 3rd Court
Westfield, WI 53964

Phone: (715) 347-1311
Fax: (715) 344-8127
Email: ronlewmatt@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL #071-002091, WI #2434-057

Scott

Illinois Youth Center (IYC) - Kewanee

Name & Main Office Address: David Allred (IDOC)
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC #180-001084

Name & Main Office Address: Stacey Andrews
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW

Name & Main Office Address: Victor A. Kersey
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Name & Main Office Address: Katrina Maddox
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email: psychgirl75@sbcglobal.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LPC #178-004175; NCC-National Certified Counselor

Name & Main Office Address: Robert E. Olt
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: NCC; LCPC

Name & Main Office Address: Lisa L. Potter
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email: lpotter9@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: MS, MHP



Sex Offender Management Board Approved Provider List - By County



Scott

Illinois Youth Center (IYC) - Kewanee

Name & Main Office Address: Kenneth G. Queen
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651

Fax: (309) 852-3515

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LPC 178-004103

Name & Main Office Address: Petrita Salazar
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651

Fax: (309) 852-3515

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Name & Main Office Address: Jeffrey P. L. Sim
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651

Fax: (309) 852-3515

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-007028

Midwest Counseling

Name & Main Office Address: Bryan Denure
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885

Fax:

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LPC #180-005002, CRADC

Name & Main Office Address: Keir L. Goatley
917 Clocktower Dr. #420
Springfield, IL 62704

Phone: (217) 726-8744

Fax:

Email: kgoatley@ameritech.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-#180-004321, (IDPR), CCBT, ATLSA, IL-ATSA

Name & Main Office Address: Gil Pilapil
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885

Fax:

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Psychology Associates

Name & Main Office Address: W. David McEchron
4455 E. 56th Street
Davenport, IA 52807

Phone: (563) 355-2577

Fax: (563) 355-4015

Email: mcechronw@genesishealth.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English, Spanish

Licenses: IL LCP-#071-006817; CPQ #144



Sex Offender Management Board Approved Provider List - By County



Shelby

Cokley, Sunderland & Cokley

Name & Main Office Address: Robert L. Cokley, Ph.D.
348 West Prairie Avenue, Suite
Decatur, IL 62522

Phone: (217) 422-0053

Fax: (217) 422-0374

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW- #149-000865, Doctorate

Effingham County Probation Office

Name & Main Office Address: Sandy Taylor, MS, LCPC
106 N. Third Street
Effingham, IL 62401-3456

Phone: (217) 347-7931

Fax: (217) 347-2001

Email: sandy_taylor9@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-005527

St. Clair

Alternatives Counseling, Inc.

Name & Main Office Address: Donya Adkerson, MA
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085

Fax: (618) 288-8959

Email: donya2@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-000271

Name & Main Office Address: Bethany A. Munge, M.A., Q.M.H.P.
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085 x202

Fax: (618) 288-8959

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Children's Center for Behavioral Development

Name & Main Office Address: Robert S. Jacobs, M.Ed., LCPC
353 N. 88th Street
Centreville, IL 62203

Phone: (618) 398-1152

Fax: (618) 398-1012

Email: ccdb@mvp.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

Name & Main Office Address: Justine Livesay, M.A., LCPC, LPHA
353 N. 88th Street
Centreville, IL 62203

Phone: (618) 398-1152

Fax: (618) 398-1012

Email: ccdb@mvp.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC



Sex Offender Management Board Approved Provider List - By County



St. Clair

Children's Center for Behavioral Development

Name & Main Office Address: Chris Ochoa
353 N. 88th Street
Centreville, IL 62203

Phone: (618) 398-1152

Fax: (618) 398-1012

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-001168

Daniel J. Cuneo, Ph.D.

Name & Main Office Address: Daniel J. Cuneo, Ph.D.
2217 W. Main
Belleville, IL 62226

Phone: (618) 277-5498

Fax: (618) 235-4316

Email: dcuneo@charter.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL 071-002307 & MO Psychologist

Juvenile Transitions Center

Name & Main Office Address: Janene E. Allen
353 N. 88th Street (Rear)
Centreville, IL 62203

Phone: (618) 293-0084

Fax: (618) 293-0098

Email: j9allen@sbcglobal.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

Name & Main Office Address: Laura Brooks
353 N. 88th Street (Rear)
Centreville, IL 62203

Phone: (618) 293-0084

Fax:

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Provident Counseling

Name & Main Office Address: Caroline M. Foss
2650 Olive Street
St. Louis, MO 63103

Phone: (314) 371-6500 x1127

Fax: (314) 371-6508

Email: cfoss@providentc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Name & Main Office Address: James M. Moll
2650 Olive Street
St. Louis, MO 63103

Phone: (314) 802-2598

Fax: (314) 371-6508

Email: jm@providentc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None



Sex Offender Management Board Approved Provider List - By County



St. Clair

Provident Counseling

Name & Main Office Address: Margaret A. Schicker
2650 Olive Street
St. Louis, MO 63103

Phone: (314) 371-6500
Fax: (314) 371-6508
Email: margaret.schicker@providentc.org
Language(s): English
Licenses: LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Stark

Lutheran Social Services of Illinois

Name & Main Office Address: Dee Ann Foss
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x271
Fax: (309) 671-0503
Email: deeanne.foss-reimers@lssi.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Yvonne Wojtalik
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x245
Fax: (309) 671-0503
Email: yvonne.wojtalik@lssi.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

P. F. Dover Counseling, LLC

Name & Main Office Address: James R. Seavey
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 495-4924
Fax: (309) 495-4993
Email: jspfdovercounseling@yahoo.com
Language(s): English
Licenses: IL LCPC #180-001434

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Scott A. Smith
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 477-2278
Fax: (309) 477-3113
Email: sspfdovercounseling@yahoo.com
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Stephenson

Alliances Counseling Services

Name & Main Office Address: Ronelle Allen
119 W. First Street, Suite 110
Dixon, IL 61021

Phone: (815) 285-3073
Fax: (815) 285-3103
Email: alliances@cin.net
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Stephenson

Alliances Counseling Services

Name & Main Office Address: Brian Smith
119 W. First Street, Suite 110
Dixon, IL 61021

Phone: (815) 285-3073
Fax: (815) 285-3103
Email: alliances@cin.net
Language(s): English
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Forensic Psych Associates, Ltd.

Name & Main Office Address: Robert H. Gordon, Ph.D.
203 N. LaSalle Street, #2100
Chicago, IL 60601

Phone: (312) 917-1610
Fax: (608) 756-5174
Email: rgordon@forensicpsych.com
Language(s): English
Licenses: IL LCP

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Glenwood Testing Center

Name & Main Office Address: Frank E. Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-8133
Fax: (815) 968-4656
Email: fec@juno.com
Language(s): English
Licenses: IL LCP #071-002590

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Kyle Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-5342
Fax: (815) 968-4656
Email: drcushing@juno.com
Language(s): English
Licenses: IL LCP, Consulting Forensic Examiner

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Jeffrey B. Sundberg

Name & Main Office Address: Jeffrey B. Sundberg
P. O. Box 17044, 610 A East State Street
Rockford, IL 61110

Phone: (815) 332-8342
Fax: (815) 332-8342
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW #149-003876, ACSW, ATSA Member

Welch, Psy.D., William H.

Name & Main Office Address: William H. Welch, Psy.D.
810 E. State Street, Suite 304
Rockford, IL 61104

Phone: (815) 316-7604
Fax: (815) 316-7614
Email: neuropsychd@gmail.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP, ATSA Clinical Member, IL ATSA, CSOTS



Sex Offender Management Board Approved Provider List - By County



Stephenson

Winston J. Hopkins

Name & Main Office Address: Winston J. Hopkins
404 Midland Lane
Monona, WI 53716

Phone: (608) 221-2586

Fax:

Email: winstonkarelyn@charter.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: WI LPC 2503-125; Lic. Advanced Practice
Social Worker

Tazewell

Art Therapy and Counseling Services

Name & Main Office Address: Laurie A. Cox
101 E. College Avenue, Suite D
Normal, IL 61761

Phone: (309) 452-5326

Fax: (309) 452-5356

Email: coxlaurie@msn.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, CADC

Bohlen & Associates, SC

Name & Main Office Address: Joseph G. Bohlen, MD, Ph.D.
3001 Spring Mill Drive, Suite D
Springfield, IL 62704

Phone: (217) 546-3100

Fax: (217) 546-3284

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Physicians & Surgeons

Lutheran Social Services of Illinois

Name & Main Office Address: Dee Ann Foss
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x271

Fax: (309) 671-0503

Email: deeanne.foss-reimers@lssi.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

Name & Main Office Address: Yvonne Wojtalik
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x245

Fax: (309) 671-0503

Email: yvonne.wojtalik@lssi.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

Midwest Counseling

Name & Main Office Address: Bryan Denure
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885

Fax:

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LPC #180-005002, CRADC



Sex Offender Management Board Approved Provider List - By County



Tazewell

Midwest Counseling

Name & Main Office Address: Keir L. Goatley
917 Clocktower Dr. #420
Springfield, IL 62704

Phone: (217) 726-8744

Fax:

Email: kgoatley@ameritech.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-#180-004321, (IDPR), CCBT, ATLSA, IL-ATSA

Name & Main Office Address: Gil Pilapil
15 S. Capitol, Suite 207
Pekin, IL 61554

Phone: (309) 241-0885

Fax:

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

P. F. Dover Counseling, LLC

Name & Main Office Address: James R. Seavey
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 495-4924

Fax: (309) 495-4993

Email: jspfdovercounseling@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-001434

Name & Main Office Address: Scott A. Smith
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 477-2278

Fax: (309) 477-3113

Email: sspfdovercounseling@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC

Robert Young Center for Community Mental Health

Name & Main Office Address: Lisa Curry
4600 3rd Street
Moline, IL 61265

Phone: (309) 779-2038

Fax: (309) 779-2167

Email: currylctrinityqc.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-149-005922, LISW-Iowa

Name & Main Office Address: Scott Stange
4600 3rd Street
Moline, IL 61265

Phone: (309) 779-2031

Fax: (309) 779-2167

Email: stange@trinityqc.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW, LISW, Clinical Member ATSA



Sex Offender Management Board Approved Provider List - By County



Union

First Judicial Circuit of Illinois-Probation & Court Services

Name & Main Office Address:	Marlynn A. Frailey 201 W. Main Marion, IL 62959	Phone: (618) 993-1840 Fax: (618) 993-1865 Email: mfrailey@firstcircuitprobation.com
Services Provided:		Language(s): English Licenses: CAC; IAODAPCA #6771
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	No	All treatment provider qualifications? No
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Kosmicki, Ph.D., Frank X.

Name & Main Office Address:	Frank X. Kosmicki, Ph.D. 231 W. Main Street Carbondale, IL 62901	Phone: (618) 203-6730 Fax: (618) 529-3171 Email:
Services Provided:		Language(s): English Licenses: IL LCP #071-006668
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	No	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Massac County Mental Health

Name & Main Office Address:	Patricia Gillespie 206 W. 5th Street Metropolis, IL 62960	Phone: (618) 524-9368 Fax: (618) 524-9551 Email:
Services Provided:		Language(s): English Licenses: Sexual Abuse Treatment Counselor, BS, MHP, 17 yrs experience
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Name & Main Office Address:	Yvonne J. Rath 206 W. 5th Street Metropolis, IL 62960	Phone: (618) 524-9368 Fax: (618) 524-9551 Email: mcmh@hcis.net
Services Provided:		Language(s): English Licenses: IL LCPC, NCC, MAC, CCJS, PCGC, CARF, Medicaid, Child Welfare, Substance Abuse - Agency, Individual
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Michael E. Althoff, Ph.D.

Name & Main Office Address:	Michael E. Althoff, Ph.D. 201 E. Main, Suite 3D Carbondale, IL 62901	Phone: (618) 549-3587 Fax: (618) 549-2695 Email: mealthoff@aol.com
Services Provided:		Language(s): English Licenses: IL LCP, IL Clinical Member - ATSA
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Vermilion

Art Therapy and Counseling Services

Name & Main Office Address:	Laurie A. Cox 101 E. College Avenue, Suite D Normal, IL 61761	Phone: (309) 452-5326 Fax: (309) 452-5356 Email: coxlaurie@msn.com
Services Provided:		Language(s): English Licenses: IL LCPC, CADC
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes



Sex Offender Management Board Approved Provider List - By County



Vermilion

Community Resource and Counseling Center

Name & Main Office Address: Laurelyn Cropek
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302

Fax: (217) 379-4304

Email: crcc@illicom.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-149-005667

Name & Main Office Address: Laurie A. Gilbert
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302

Fax: (217) 379-4304

Email: lgilbert@4crcc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-149-010484

Name & Main Office Address: Christine Mayer
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302

Fax: (217) 379-4304

Email: ccrc@illicom.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-149.009275

Name & Main Office Address: Jeffrey C. Reynolds
P.O. Box 162
Paxton, IL 60957

Phone: (217) 379-4302

Fax: (217) 379-4304

Email: jreynolds@4crcc.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-004199

East Central Illinois Humanistics

Name & Main Office Address: Wendy Barnes
500 E. Fairchild Street, Suite A
Danville, IL 61832

Phone: (217) 709-0282

Fax: (217) 709-0283

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Name & Main Office Address: Olav H. Christensen
500 E. Fairchild Street, Suite A
Danville, IL 61832

Phone: (217) 709-0282

Fax: (217) 709-0283

Email: olav@ecih.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-004931, CADC #15010

Kleppin, MS.Ed., LCPC, CADC, Kleppin

Name & Main Office Address: Michael Kleppin, MS.Ed., LCPC, CADC
P. O. Box 416
Saboy, IL 61874

Phone: (217) 398-0413

Fax: (217) 239-6616

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-#180-005001, CADC



Sex Offender Management Board Approved Provider List - By County



Vermilion

Kling, Joanna M.Ed., LCPC

Name & Main Office Address: Joanna Kling, M.Ed., LCPC
507 W. Springfield Avenue
Urbana, IL 61801

Phone: (217) 344-4722
Fax: (217) 344-4733
Email: jokling611@insightbb.com
Language(s): English
Licenses: IL LCPC, NBCC

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Onarga Academy

Name & Main Office Address: Rebecca Cunningham
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: rcunnin@nexus-ona.org
Language(s): English
Licenses: IL LCPC #180-001150

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: William D. Featherstone
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: bfeathe@nexus-ona.org
Language(s): English
Licenses:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Douglas C. Gossett, M.A., LCPC
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: dgossset@nexus-ona.org
Language(s): English
Licenses: IL LCPC #180-005298

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Jamie Kozma
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: jkozma@nexus-ona.org
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Bill Mitchell
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: wmitche@nexus-ona.org
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Karen Robertie
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: krobert@nexus-ona.org
Language(s): English
Licenses: IL LCPC 180-005314

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Vermilion

Onarga Academy

Name & Main Office Address: Michael D. Simpson
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: msimpso@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC 180-005921

Name & Main Office Address: Tricia Renee St. Pierre
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: tstpier@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: NCC

Name & Main Office Address: Ryan Weidenbenner
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: rweiden@nexus-ong.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC

Name & Main Office Address: Timothy E. White
104 N. Locust
Onarga, IL 60955

Phone: (815) 268-4001
Fax: (815) 268-7977
Email: twhite@nexus-ona.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Pepper, LCSW, ACSW Leta

Name & Main Office Address: Leta Pepper
500 E. Fairchild, Suite A-1
Danville, IL 61832

Phone: (217) 446-1078
Fax: (217) 446-1078
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: ACSW, LCSW

Rickey Williams, LPC

Name & Main Office Address: Rickey Williams
500 E. Fairchild Street, Suite A
Danville, IL 61832-3117

Phone: (217) 709-0282
Fax: (217) 709-0283
Email: rickeywms@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LPC-#178-002657



Sex Offender Management Board Approved Provider List - By County



Vermilion

Sietert Counseling Center

Name & Main Office Address: James G. Russell
918 N. Walnut
Danville, IL 61832

Phone: (217) 446-1300

Fax: (217) 446-1325

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-004885

The Center for Children Services

Name & Main Office Address: Gary Burns
702 N. Logan
Danville, IL 61832

Phone: (217) 446-1300

Fax: (217) 446-1325

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-004923

Name & Main Office Address: James G. Russell
702 N. Logan
Danville, IL 61832

Phone: (217) 446-1300

Fax: (217) 446-1325

Email:

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-004885

Wabash

Gary Lemmon and Associates, Inc.

Name & Main Office Address: Gary L. Lemmon
904 E. Main
Norris City, IL 62869

Phone: (618) 378-3010

Fax: (618) 378-2308

Email: glemmon@shawneelink.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-#149-00164, Clinical Member ATSA

Warren

9th Judicial Circuit

Name & Main Office Address: Tye Adair
130 Lafayette, Suite 10
Macomb, IL 61455

Phone: (309) 837-2307

Fax: (309) 833-5570

Email: tadair@9thjudicial.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Knox County Juvenile Detention Home - Court Services, 9th Judicial

Name & Main Office Address: Stewart Nyi
1319 E. 5th
Galesburg, IL 61401

Phone: (309) 342-2481

Fax: (309) 343-7922

Email: snyi@9thjudicial.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-180-001104



Sex Offender Management Board Approved Provider List - By County



Warren

P. F. Dover Counseling, LLC

Name & Main Office Address: James R. Seavey
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 495-4924
Fax: (309) 495-4993
Email: jspfdovercounseling@yahoo.com
Language(s): English
Licenses: IL LCPC #180-001434

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Scott A. Smith
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 477-2278
Fax: (309) 477-3113
Email: sspfdovercounseling@yahoo.com
Language(s): English
Licenses: IL LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Washington

Alternatives Counseling, Inc.

Name & Main Office Address: Donya Adkerson, MA
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085
Fax: (618) 288-8959
Email: donya2@aol.com
Language(s): English
Licenses: IL LCPC-180-000271

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Bethany A. Munge, M.A., Q.M.H.P.
88 S. Main, Suite 2, P.O. Box 639
Glen Carbon, IL 62034

Phone: (618) 288-8085 x202
Fax: (618) 288-8959
Email:
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Daniel J. Cuneo, Ph.D.

Name & Main Office Address: Daniel J. Cuneo, Ph.D.
2217 W. Main
Belleville, IL 62226

Phone: (618) 277-5498
Fax: (618) 235-4316
Email: dcuneo@charter.net
Language(s): English
Licenses: IL 071-002307 & MO Psychologist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Darlene M. Bushue, M.A., LCPC

Name & Main Office Address: #Error

Phone: (618) 444-7736
Fax:
Email:
Language(s): English
Licenses: IL LCPC 180-004485

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Wayne

Gary Lemmon and Associates, Inc.

Name & Main Office Address: Gary L. Lemmon
904 E. Main
Norris City, IL 62869

Phone: (618) 378-3010

Fax: (618) 378-2308

Email: glemmon@shawneelink.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-#149-00164, Clinical Member ATSA

Stanislaus, MD, Angeline

Name & Main Office Address: Angeline Stanislaus, M.D.
621 S. New Ballas Road, Suite 268A
St. Louis, MO 63141

Phone: (618) 791-1777

Fax:

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Medical License #036-102686 ; Certification in Forensic Psychiatry

White

Gary Lemmon and Associates, Inc.

Name & Main Office Address: Gary L. Lemmon
904 E. Main
Norris City, IL 62869

Phone: (618) 378-3010

Fax: (618) 378-2308

Email: glemmon@shawneelink.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW-#149-00164, Clinical Member ATSA

Michael E. Althoff, Ph.D.

Name & Main Office Address: Michael E. Althoff, Ph.D.
201 E. Main, Suite 3D
Carbondale, IL 62901

Phone: (618) 549-3587

Fax: (618) 549-2695

Email: mealthoff@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, IL Clinical Member - ATSA

Whiteside

Advanced Behavioral Health

Name & Main Office Address: W. Christopher Tolen, Psy.D.
2101 Windish Drive, Suite 100
Galesburg, IL 61401

Phone: (309) 342-6852

Fax: (309) 344-0071

Email: drtolen@byu.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-006296

Alliances Counseling Services

Name & Main Office Address: Ronelle Allen
119 W. First Street, Suite 110
Dixon, IL 61021

Phone: (815) 285-3073

Fax: (815) 285-3103

Email: alliances@cin.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC



Sex Offender Management Board Approved Provider List - By County



Whiteside

Alliances Counseling Services

Name & Main Office Address: Brian Smith
119 W. First Street, Suite 110
Dixon, IL 61021

Phone: (815) 285-3073
Fax: (815) 285-3103
Email: alliances@cin.net
Language(s): English
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address: Michael Albert
27255 N. Fairfield Road
Mundelein, IL 60060

Phone: (847) 487-9455
Fax: (847) 487-9360
Email: malbert@abtc-centers
Language(s): English
Licenses: IL LPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Jenny Anderson
27255 N. Fairfield Road
Mundelein, IL 60060

Phone: (847) 587-7905
Fax: (847) 487-9360
Email: janderson@abtc-centers.org
Language(s): English
Licenses: IL LSW

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Jenifer Brickman
27255 N. Fairfield Road
Mundelein, IL 60060

Phone: (847) 487-9455
Fax: (847) 487-9360
Email: jbrickman@abtc-centers.org
Language(s): English
Licenses: IL LCSW-149-010065

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Arturo Gudino, Jr.
715 Lake Street
Oak Park, IL 60301

Phone: (847) 487-9455 x226
Fax: (708) 386-8145
Email: agudino@abtc-centers.org
Language(s): English , Spanish
Licenses: IL LCPC#180-004330

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Michael Igaravidez, Psy.D.
715 Lake Street
Oak Park, IL 60301

Phone: (847) 487-9455
Fax: (708) 386-8145
Email: migaravidez@abtc-centers.org
Language(s): English
Licenses: IL LCP #071-006172

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Theresa Jackson
715 Lake Street
Oak Park, IL 60301

Phone: (847) 487-9455
Fax: (708) 848-6176
Email: tjackson@abtc-centers.org
Language(s): English
Licenses: IL LSW-#150-006805

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Whiteside

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Dawn Livorsi 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: dlivorsi@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Deborah May 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: dmay@abtc-centers.org Language(s): English Licenses: IL LCSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Robin McGinnis, MSW 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: rmcginnis@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Becky Palmer 715 Lake Street Oak Park, IL 60301	Phone: (708) 386-8145 x23 Fax: (708) 848-6176 Email: bpalmer802@aol.com Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Melissa Pannell 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x145 Fax: (847) 487-9360 Email: mpannell@abtc-centers.org Language(s): English Licenses: IL LPC, ABEL Certified
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Lauren Parks 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x146 Fax: (847) 487-9360 Email: lparks@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Kevin J. Robson 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x165 Fax: (847) 487-9037 Email: krobson@abtc-centers.org Language(s): English Licenses: First Aid, CPR Part I, Surrogate PatientTrainer
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



Whiteside

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Eva San Pedro 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 386-8145 Email: esanpedro@abtc-centers.org Language(s): English , Spanish Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Carolyn Seaman 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x135 Fax: (847) 487-9360 Email: cseaman@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Natalie Seel 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: nseel@abtc-centers.org Language(s): English Licenses: LSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Edgar F. Sherk 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: esherk@abtc-centers.org Language(s): English Licenses: IL LCSW #149-002963
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Susan Urban 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9037 Email: surban@abtc-centers.org Language(s): English Licenses: IL LCSW #149-011169
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Keef Weinstein 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: kweinstein@abtc-centers.org Language(s): English Licenses: IL LPC
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Karen Wolownik, MSW 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: kwolownik@abtc-centers.org Language(s): English Licenses: IL-LCSW #149-010954, CSW (Michigan), Certified Adolescent Sexual Offender Prof.
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



Whiteside

Bohlen & Associates, SC

Name & Main Office Address: Joseph G. Bohlen, MD, Ph.D.
3001 Spring Mill Drive, Suite D
Springfield, IL 62704

Phone: (217) 546-3100

Fax: (217) 546-3284

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Physicians & Surgeons

Braden Counseling Center

Name & Main Office Address: Danielle Calsyn
2580 DeKalb Avenue
Sycamore, IL 60178

Phone: (815) 787-9000

Fax: (815) 787-9015

Email: dcalsyn@frontiernet.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: CADC #21278

Family Services Agency of DeKalb County, Inc.

Name & Main Office Address: Kathleen M. Alberts, MSW, LCPC
14 Health Services Drive
DeKalb, IL 60115

Phone: (815) 758-8618

Fax: (815) 758-7569

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-004462; Certified Sex Offender
Tx Specialist

Family, Divorce & Mediation of Ogle County

Name & Main Office Address: Kathleen M. Alberts, MSW, LCPC
1500 West Lincoln Avenue
Rochelle, IL 61068

Phone: (815) 562-8818

Fax: (815) 562-8818

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC #180-004462; Certified Sex Offender
Tx Specialist

Glenwood Testing Center

Name & Main Office Address: Frank E. Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-8133

Fax: (815) 968-4656

Email: fec@juno.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP #071-002590

Name & Main Office Address: Kyle Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-5342

Fax: (815) 968-4656

Email: drcushing@juno.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, Consulting Forensic Examiner



Sex Offender Management Board Approved Provider List - By County



Whiteside

Illinois Youth Center (IYC) - Kewanee

Name & Main Office Address:		David Allred (IDOC) 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email:
Services Provided:		Provider Meets the following qualifications:	Language(s): English Licenses: IL LCPC #180-001084
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Stacey Andrews 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email:
Services Provided:		Provider Meets the following qualifications:	Language(s): English Licenses: IL LCSW
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Victor A. Kersey 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email:
Services Provided:		Provider Meets the following qualifications:	Language(s): English Licenses: None
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Katrina Maddox 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email: psychgirl75@sbcglobal.net
Services Provided:		Provider Meets the following qualifications:	Language(s): English Licenses: IL LPC #178-004175; NCC-National Certified Counselor
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Robert E. Olt 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email:
Services Provided:		Provider Meets the following qualifications:	Language(s): English Licenses: NCC; LCPC
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Lisa L. Potter 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email: lpotter9@aol.com
Services Provided:		Provider Meets the following qualifications:	Language(s): English Licenses: MS, MHP
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Kenneth G. Queen 2021 Kentville Road, P.O. Box 518 Kewanee, IL 61443	Phone: (309) 852-3651 Fax: (309) 852-3515 Email:
Services Provided:		Provider Meets the following qualifications:	Language(s): English Licenses: IL LPC 178-004103
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



Whiteside

Illinois Youth Center (IYC) - Kewanee

Name & Main Office Address: Petrita Salazar
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Name & Main Office Address: Jeffrey P. L. Sim
2021 Kentville Road, P.O. Box 518
Kewanee, IL 61443

Phone: (309) 852-3651
Fax: (309) 852-3515
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP #071-007028

Robert Young Center for Community Mental Health

Name & Main Office Address: Lisa Curry
4600 3rd Street
Moline, IL 61265

Phone: (309) 779-2038
Fax: (309) 779-2167
Email: currylctrinityqc.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW-149-005922, LISW-Iowa

Name & Main Office Address: Scott Stange
4600 3rd Street
Moline, IL 61265

Phone: (309) 779-2031
Fax: (309) 779-2167
Email: stange@trinityqc.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW, LISW, Clinical Member ATSA

Will

Abdul Basit, Ph.D.

Name & Main Office Address: Abdul Basit, Ph.D.
3612 W. Lincoln Highway, Suite 17
Olympia Fields, IL 60461

Phone: (708) 767-3452
Fax: (708) 720-0130
Email: abasit97@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): Arabic , English , Hindi , Urdu
Licenses: IL LCP #071-005712

Affiliated Psychologists, LTD

Name & Main Office Address: Patrick Hoatlin, LCSW
4801 W. Peterson Avenue, Suite 525
Chicago, IL 60646

Phone: (773) 286-3100
Fax: (773) 777-7543
Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCSW #149-011120



Sex Offender Management Board Approved Provider List - By County



Will

Affiliated Psychologists, LTD

Name & Main Office Address:	Barry M. Leavitt, Psy.D. 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (773) 286-3100 Fax: (773) 777-7543 Email: ckopeny@ap-ltd.com
Services Provided:		Language(s): English Licenses: IL LCP, Hare Psychopathy Checklist (PCL-R) Certification
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Ray Quackenbush 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (773) 286-3100 Fax: (773) 777-7543 Email: quaq@earthlink.net
Services Provided:		Language(s): English Licenses: IL Psychology License #091-006293, Clinical Member ATSA
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Phil Reidda, Ph.D. 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (773) 286-3100 Fax: (773) 777-7543 Email: ckopeny@ap-ltd.com
Services Provided:		Language(s): English Licenses: IL LCP, Hare Psychopathy Checklist (PCL-R) Certification, Diplomat American Board Professional Psychologists
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Laura T. Schultz, Psy.D. 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (773) 286-3100 Fax: (773) 777-7543 Email:
Services Provided:		Language(s): English Licenses: IL LCP
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Pamela C. Van Wyk 4801 W. Peterson Avenue, Suite 525 Chicago, IL 60646	Phone: (765) 721-7863 Fax: (773) 777-7543 Email: pcvw811@illicom.net
Services Provided:		Language(s): English Licenses: IL-LCPC, IN-LMHC, AL-LMFT, ATSA Clinical Member
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	No	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	No	All applicant attestation qualifications? Yes

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:	Michael Albert 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: malbert@abtc-centers
Services Provided:		Language(s): English Licenses: IL LPC
Evaluations ?	Yes	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes
Name & Main Office Address:	Jenny Anderson 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 587-7905 Fax: (847) 487-9360 Email: janderson@abtc-centers.org
Services Provided:		Language(s): English Licenses: IL LSW
Evaluations ?	No	Provider Meets the following qualifications:
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? No
Juvenile ?	Yes	All applicant attestation qualifications? Yes



Sex Offender Management Board Approved Provider List - By County



Will

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Jenifer Brickman 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: jbrickman@abtc-centers.org Language(s): English Licenses: IL LCSW-149-010065
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Arturo Gudino, Jr. 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 x226 Fax: (708) 386-8145 Email: agudino@abtc-centers.org Language(s): English , Spanish Licenses: IL LCPC#180-004330
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Michael Igaravidez, Psy.D. 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 386-8145 Email: migaravidez@abtc-centers.org Language(s): English Licenses: IL LCP #071-006172
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Theresa Jackson 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 848-6176 Email: tjackson@abtc-centers.org Language(s): English Licenses: IL LSW-#150-006805
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Dawn Livorsi 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: dlivorsi@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Deborah May 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: dmay@abtc-centers.org Language(s): English Licenses: IL LCSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Robin McGinnis, MSW 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: rmcginnis@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



Will

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Becky Palmer 715 Lake Street Oak Park, IL 60301	Phone: (708) 386-8145 x23 Fax: (708) 848-6176 Email: bpalmer802@aol.com Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Melissa Pannell 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x145 Fax: (847) 487-9360 Email: mpannell@abtc-centers.org Language(s): English Licenses: IL LPC, ABEL Certified
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Lauren Parks 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x146 Fax: (847) 487-9360 Email: lparks@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Kevin J. Robson 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x165 Fax: (847) 487-9037 Email: krobson@abtc-centers.org Language(s): English Licenses: First Aid, CPR Part I, Surrogate PatientTrainer
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Eva San Pedro 715 Lake Street Oak Park, IL 60301	Phone: (847) 487-9455 Fax: (708) 386-8145 Email: esanpedro@abtc-centers.org Language(s): English , Spanish Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Carolyn Seaman 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 x135 Fax: (847) 487-9360 Email: cseaman@abtc-centers.org Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Natalie Seel 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: nseel@abtc-centers.org Language(s): English Licenses: LSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



Will

Alternative Behavior Treatment Centers (ABTC)

Name & Main Office Address:		Edgar F. Sherk 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: esherk@abtc-centers.org Language(s): English Licenses: IL LCSW #149-002963
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Susan Urban 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9037 Email: surban@abtc-centers.org Language(s): English Licenses: IL LCSW #149-011169
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Keef Weinstein 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: kweinstein@abtc-centers.org Language(s): English Licenses: IL LPC
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Karen Wolownik, MSW 27255 N. Fairfield Road Mundelein, IL 60060	Phone: (847) 487-9455 Fax: (847) 487-9360 Email: kwolownik@abtc-centers.org Language(s): English Licenses: IL-LCSW #149-010954, CSW (Michigan), Certified Adolescent Sexual Offender Prof.
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		

Assisted Awareness

Name & Main Office Address:		Karen L. Smith, MA, LCPC 81 N. Chicago Street, Suite 202 Joliet, IL 60432	Phone: (815) 723-2844 Fax: (815) 740-8817 Email: karenspc@yahoo.com Language(s): English Licenses: IL LCPC
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Richard D. "Bo" Travis, MA, LCPC 81 N. Chicago Street, Suite 202 Joliet, IL 60432	Phone: (815) 723-2844 Fax: (815) 740-8817 Email: botravis@earthlink.net Language(s): English Licenses: IL LCPC-#180-003461
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		

Catholic Charities

Name & Main Office Address:		Sandra E. Jamison 651 W. Lake Street Chicago, IL 60606	Phone: (312) 808-1080 Fax: (312) 808-6176 Email: jayds6049@sbcglobal.net Language(s): English Licenses: IL LCSW #149-004566
Services Provided:		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	No	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		



Sex Offender Management Board Approved Provider List - By County



Will

Center for Contextual Change

Name & Main Office Address: Don R.J. Castaldi, Psy.D.
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (708) 524-1301 x2
Fax: (708) 524-1401
Email: donc@centerforcontextualchange.org
Language(s): English
Licenses: Advanced Training in Abel Screen

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Don R.J. Castaldi, Psy.D.
125 N. Marion Street, Suite 201
Oak Park, IL 60301

Phone: (708) 524-1301 x2
Fax: (708) 524-1401
Email: donc@centerforcontextualchange.org
Language(s): English
Licenses: Advanced Training in Abel Screen

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Joseph J. Cortese
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (847) 676-4447 x312
Fax: (847) 676-4450
Email: cortese1@comcast.net
Language(s): English
Licenses: IL LCSW #149-000645

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Peg Duros
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (847) 676-4447 x221
Fax: (847) 676-4450
Email: pegd@centerforcontextualchange.org
Language(s): English
Licenses: IL LCSW #149-002016

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Joel A. Falco, MA, LCSW
125 N. Marion Street, Suite 201
Oak Park, IL 60301

Phone: (847) 674-4447 x300
Fax: (847) 676-4450
Email: hopecat@hotmail.com
Language(s): English
Licenses: IL LCSW, Clinical Member of ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Joel A. Falco, MA, LCSW
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (847) 674-4447 x300
Fax: (847) 676-4450
Email: hopecat@hotmail.com
Language(s): English
Licenses: IL LCSW, Clinical Member of ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Michael "Mike" Just
125 N. Marion Street, Suite 201
Oak Park, IL 60301

Phone: (847) 676-4447 x301
Fax: (847) 676-4450
Email: justmikejust@sbcglobal.net
Language(s): English
Licenses: IL LCPC #180-006042; Attorney

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Will

Center for Contextual Change

Name & Main Office Address: Michael "Mike" Just
9239 Gross Point Road, Suite 300
Skokie, IL 60077

Phone: (847) 676-4447 x301
Fax: (847) 676-4450
Email: justmikejust@sbcglobal.net
Language(s): English
Licenses: IL LCPC #180-006042; Attorney

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Kelli Underwood
125 N. Marion Street, Suite 201
Oak Park, IL 60301

Phone: (847) 676-4447 x223
Fax: (847) 676-4450
Email: kelliunderwoodccc@hotmail.com
Language(s): English
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Chuck Lederman, LCSW

Name & Main Office Address: Chuck Lederman, LCSW
68 Main Street, P. O. Box 95
Oswego, IL 60543

Phone: (630) 269-3146
Fax: (630) 551-0988
Email: chuck60543@aol.com
Language(s): English
Licenses: IL LCSW

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Dr. James Simone and Associates, LLC

Name & Main Office Address: James Simone
201 Park Place, Suite 2
Bourbannais, IL 60914

Phone: (815) 258-6685
Fax: (815) 468-5463
Email: jimdoc21@hotmail.com
Language(s): English
Licenses: IL LCP #071-005467

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Forensic Psychology Associates

Name & Main Office Address: Mark Brenzinger, PsyD
445 E. Ohio, Suite 450
Chicago, IL 60611

Phone: (312) 740-9691
Fax: (312) 527-9088
Email: ciba9@worldnet.att.net
Language(s): English
Licenses: None

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Eric Ostrov, J.D., Ph.D., ABPP
445 E. Ohio, Suite 450
Chicago, IL 60611

Phone: (312) 740-9691
Fax: (312) 527-9088
Email: eostrov@aol.com
Language(s): English
Licenses: IL Psy.D. 071-001951, IL Attorney #3128938

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Will

Forensic Psychology Associates

Name & Main Office Address: Susan Page, Psy.D.
445 E. Ohio, Suite 450
Chicago, IL 60611

Phone: (312) 399-3140
Fax: (312) 527-9088
Email: slpage27@aol.com

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

IDHS Treatment & Detention Facility

Name & Main Office Address: Michael P. Bednarz, MD
401 Woodruff Road
Joliet, IL 60432

Phone: (815) 740-8781 x232
Fax: (815) 740-8817
Email: dhs41an@dhs.state.il.us

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: Licensed Physician & Surgeon; Controlled License (substance); DEA License; Brd cert internal medicine & psychiatrist

Name & Main Office Address: Mark Brenzinger, PsyD
401 Woodruff Road
Joliet, IL 60432

Phone: (815) 740-8781
Fax: (815) 740-8817
Email: ciba9@worldnet.att.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: None

Name & Main Office Address: Robert Brucker, Jr.
401 Woodruff Road
Joliet, IL 60432

Phone: (815) 740-8781
Fax: (815) 740-8817
Email: dhs4140@dhs.state

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP-071-006097

Name & Main Office Address: Lea B. Chankin, Psy.D.
401 Woodruff Road
Joliet, IL 60432

Phone: (815) 740-8781
Fax: (815) 740-8817
Email: dhs4120@dhs.state.il.us

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP-071-006553

Name & Main Office Address: Jeffrey C. Clausen
401 Woodruff Road
Joliet, IL 60432

Phone: (815) 740-8781
Fax: (815) 740-8817
Email: jclausen@mc.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC 180-005378

Name & Main Office Address: Detraill Dearbone-Collins
401 Woodruff Road
Joliet, IL 60432

Phone: (815) 740-8781
Fax: (815) 740-8817
Email: dearbon@cs.com

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC, CADCC, CCJS



Sex Offender Management Board Approved Provider List - By County



Will

IDHS Treatment & Detention Facility

Name & Main Office Address:		William DuBois 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 x251 Fax: (815) 740-8817 Email:
<i>Services Provided:</i>		Provider Meets the following qualifications:	Language(s): English Licenses: IL LPC #178-004016
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Catherine A. Furtado, Psy.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: dhs41cp@dhs.state.il.us
<i>Services Provided:</i>		Provider Meets the following qualifications:	Language(s): English Licenses: None
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Steve Gaskell 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 x246 Fax: (815) 207-1538 Email: drsdg71@gmail.com
<i>Services Provided:</i>		Provider Meets the following qualifications:	Language(s): English Licenses: IL LCP #71006877; GA #002566
Evaluations ?	Yes	All treatment provider qualifications?	No
Treatment ?	No	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Guy Groot 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: g.groot@mchsi.com
<i>Services Provided:</i>		Provider Meets the following qualifications:	Language(s): English Licenses: IL LCPC, CADC, MISA II
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Shan Jumper 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 x221 Fax: (815) 740-8817 Email: dhs4115@dhs.state.il.us
<i>Services Provided:</i>		Provider Meets the following qualifications:	Language(s): English Licenses: IL LCP 071-006021
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Carey Lavaux 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8810 Email: dhs4141@dhs.state.il.us
<i>Services Provided:</i>		Provider Meets the following qualifications:	Language(s): English Licenses: IL LPC-#178-001064
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Chad Lewing 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: chadlewing@comcast.net
<i>Services Provided:</i>		Provider Meets the following qualifications:	Language(s): English Licenses: None
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		



Sex Offender Management Board Approved Provider List - By County



Will

IDHS Treatment & Detention Facility

Name & Main Office Address:		Kimberly S. Litton, Psy.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: dhs41bb@dhs.state.il.us Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications?	Yes
Juvenile ?	No		
Name & Main Office Address:		Scott W. Maieritsch, Ph.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: dhs4139@dhs.state.il.us Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications?	Yes
Juvenile ?	No		
Name & Main Office Address:		Rhoda Meacham 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 x266 Fax: (815) 740-8817 Email: Language(s): English Licenses: LCSW #149-011604
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications?	Yes
Juvenile ?	No		
Name & Main Office Address:		Shane M. Reister, Psy.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8780 Email: shanemreister@hotmail.com Language(s): English Licenses: IL LCP#071-007001
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications?	Yes
Juvenile ?	No		
Name & Main Office Address:		Janet Sand 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: dhs41A6@dhs.state.il.us Language(s): English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications?	Yes
Juvenile ?	No		
Name & Main Office Address:		Craig Schiesser, Psy.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: Language(s): English Licenses: IL LCP-#071-005597
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications?	Yes
Juvenile ?	No		
Name & Main Office Address:		Karen Smith 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: karenspc@yahoo.com Language(s): English Licenses: IL LCPC
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications?	Yes
Juvenile ?	No		



Sex Offender Management Board Approved Provider List - By County



Will

IDHS Treatment & Detention Facility

Name & Main Office Address:		Thomas J. Speaker, Ph.D., LCPC 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: tspeaker@sbcglobal.net Language(s): English Licenses: IL LCPC #180-003801, CADC III, WI LCSW
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Natasha Stumpf 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: Language(s): English Licenses: IL LPC-#178-002746, NCC
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Sylvia Sun 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: psysun@yahoo.com Language(s): English , Mandarin Licenses: IL LCP #071-005619
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Phyllis Tolley 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 Fax: (815) 740-8817 Email: Language(s): Cantonese , English Licenses: None
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	Yes		
Name & Main Office Address:		Richard D. "Bo" Travis, MA, LCPC 401 Woodruff Road Joliet, IL 60432	Phone: (815) 723-2844 Fax: (815) 740-8817 Email: botravis@earthlink.net Language(s): English Licenses: IL LCPC-#180-003461
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Brent Ulrich 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 x251 Fax: (815) 740-8817 Email: blurich623@juno.com Language(s): English Licenses: LPC #178-004133
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	No	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	No
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		
Name & Main Office Address:		Raymond Wood, Ph.D. 401 Woodruff Road Joliet, IL 60432	Phone: (815) 740-8781 x220 Fax: (815) 740-8817 Email: dhs4108@dhs.state.il.us Language(s): English Licenses: IL LCP-#071-005813
<i>Services Provided:</i>		Provider Meets the following qualifications:	
Evaluations ?	Yes	All treatment provider qualifications?	Yes
Treatment ?	Yes	All evaluation provider qualifications?	Yes
Adult ?	Yes	All applicant attestation qualifications:	Yes
Juvenile ?	No		



Sex Offender Management Board Approved Provider List - By County



Will

Kane County Diagnostic Center

Name & Main Office Address:	Timothy Brown, Psy.D. 757 E. Fabyan Parkway Batavia, IL 60510	Phone: (630) 262-4480 Fax: (630) 262-4484 Email: browntimothy@co.kane.il.us Language(s): English Licenses: IL LCP #071-003827
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ?	Yes	
Treatment ?	No	All treatment provider qualifications? No
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Name & Main Office Address:	Lesley Kane, Psy.D. 757 E. Fabyan Parkway Batavia, IL 60510	Phone: (630) 262-4480 Fax: (630) 262-4484 Email: kanelesley@co.kane.il.us Language(s): English Licenses: IL LCP #071-006757
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ?	Yes	
Treatment ?	No	All treatment provider qualifications? No
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Name & Main Office Address:	Mark J. Kuzia, Psy.D. 757 E. Fabyan Parkway Batavia, IL 60510	Phone: (630) 262-4480 Fax: (630) 262-4484 Email: mjkuzia@netzero.com Language(s): English Licenses: None
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ?	Yes	
Treatment ?	No	All treatment provider qualifications? No
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Name & Main Office Address:	Amanda Rosenkoetter 757 E. Fabyan Parkway Batavia, IL 60510	Phone: (630) 262-4480 Fax: (630) 262-4484 Email: ajrosenkoetter@comcast.net Language(s): English Licenses: IL LCP
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ?	Yes	
Treatment ?	No	All treatment provider qualifications? No
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Name & Main Office Address:	Alexandra Tsang, Psy.D. 757 E. Fabyan Parkway Batavia, IL 60510	Phone: (630) 444-1081 Fax: (630) 262-4484 Email: tsangalexandra@co.kane.il.us Language(s): English , Polish Licenses: IL LCP
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ?	Yes	
Treatment ?	No	All treatment provider qualifications? No
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Kids Hope United

Name & Main Office Address:	Kristan Cameron 215 N. Milwaukee Avenue Lake Villa, IL 60046	Phone: (847) 245-6570 Fax: (847) 245-6714 Email: kcameron@kidshopeunited.org Language(s): English Licenses: IL LCPC 180-002580
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ?	Yes	
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	No	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes

Name & Main Office Address:	Shenandoah Cardwell 215 N. Milwaukee Avenue Lake Villa, IL 60046	Phone: (847) 245-6544 Fax: (847) 245-6714 Email: scardwell.LCPC@comcast.net Language(s): English Licenses: IL LCPC #180-001256, WI LPC #2906-125, NCC #22818
<i>Services Provided:</i>	Provider Meets the following qualifications:	
Evaluations ?	Yes	
Treatment ?	Yes	All treatment provider qualifications? Yes
Adult ?	Yes	All evaluation provider qualifications? Yes
Juvenile ?	Yes	All applicant attestation qualifications? Yes



Sex Offender Management Board Approved Provider List - By County



Will

Kids Hope United

Name & Main Office Address: Denny Clouse, MSW, LCSW
1750 E. Main Street, Suite 40
St. Charles, IL 60174

Phone: (847) 741-7140
Fax: (847) 741-2089
Email: dclouse@kidshopeunited.org
Language(s): English
Licenses: IL LCSW #149-005893, Clinical ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Dennis Kyrouac
1750 E. Main Street, Suite 40
St. Charles, IL 60174

Phone: (847) 741-7140
Fax: (847) 741-2089
Email: dkyrouac@msn.com
Language(s): English
Licenses: IAODAPCA Counselor, CADC

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Liza Simon-Roper
215 N. Milwaukee Avenue
Lake Villa, IL 60046

Phone: (847) 245-6547
Fax: (847) 245-6714
Email: lsroper@kidshopeunited.org
Language(s): English
Licenses: IL LCSW, WI LCSW, ATSA Member

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

McKibbin, MS, LCPC, Alex E.

Name & Main Office Address: Alex E. McKibbin, MS, LCPC
24402 W. Lockport, Suite 2-B
Plainfield, IL 60544

Phone: (630) 456-2519
Fax: (815) 230-3652
Email: a.mckibbin@att.net
Language(s): English
Licenses: IL LCPC-180-001736

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Nicholas F. O'Riordan, Ph.D.

Name & Main Office Address: #Error

Phone: (815) 241-4575
Fax:
Email: droriordan@sbcglobal.net
Language(s): English
Licenses: IL LCP #071-3652

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Nickerson and Associates

Name & Main Office Address: Jerry Lowell
P.O. Box 239 (also office in Chicago)
Winfield, IL 60190

Phone: (630) 707-7380
Fax: (630) 839-5068
Email: jlowellLCSW@msn.com
Language(s): English
Licenses: IL LCSW #149-003408

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Will

Nickerson and Associates

Name & Main Office Address: Debra Nickerson, Psy.D.
P.O. Box 239 (also office in Chicago)
Winfield, IL 60190

Phone: (630) 752-9725
Fax: (630) 752-9726
Email: tnick@aol.com
Language(s): English
Licenses: IL LCP # 071-006020

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Psynergy Psych Services

Name & Main Office Address: Dr. J. L. Weems
1131 E. 165th Street
South Holland, IL 60473

Phone: (773) 671-0466
Fax: (708) 333-3140
Email: dr_weems@hotmail.com
Language(s): English
Licenses: IL LCPC, MISA II

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Rainbow's End

Name & Main Office Address: Judith A. Gonzalez
4747 Lincoln Mall Drive - 420
Matteson, IL 60443

Phone: (708) 748-2000
Fax:
Email: jgonza@sbcglobal.net
Language(s): English
Licenses: Pending LCPC

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

RITAS Ministry

Name & Main Office Address: Judith "Jude" C. Skallerup
325 E. Galena
Aurora, IL 60505

Phone: (630) 966-0252
Fax: (630) 966-0005
Email:
Language(s): English
Licenses: IL LCPC-180-004615, CSOTS

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Robinson, LCSW, Shirley R.

Name & Main Office Address: Shirley R. Robinson
24829 S. Tryon Street
Channahon, IL 60410

Phone: (815) 467-5552
Fax:
Email: shirley.robinson@comcast.net
Language(s): English
Licenses: LCSW, BCD

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Simmons and Associates, Inc.

Name & Main Office Address: Ronald C. Simmons, Psy.D.
P.O. Box 772
Lemont, IL 60439

Phone: (630) 257-6690
Fax: (630) 257-6690
Email: rcsandassoc@aol.com
Language(s): English
Licenses: IL LCPC #180-000152

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Will

Suire, Ph.D., David M.

Name & Main Office Address: David M. Suire, Ph.D.
1012 W. Columbia, Bldg 28
Farmington, MO 63640

Phone: (573) 330-5402

Fax:

Email: davidsuire@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	No	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Psychologist 071-006216; MO Clinical Psychologist; TX Clinical Psychologist

Will County Mental Health Department

Name & Main Office Address: Randall Bultman
501 Ella Avenue
Joliet, IL 60433

Phone: (815) 774-7326

Fax: (815) 740-8148

Email: rbultman@willcountyhealth.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

Name & Main Office Address: Patricia L. Grosskopf
501 Ella Avenue
Joliet, IL 60433

Phone: (815) 727-5081

Fax: (815) 740-8148

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: MA in Clinical Psychology, Certified in Group Therapy

Name & Main Office Address: David K. Koopman
501 Ella Avenue
Joliet, IL 60433

Phone: (815) 727-5081

Fax: (815) 740-8148

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC-#180-002643

Name & Main Office Address: Chris Sandvick
501 Ella Avenue
Joliet, IL 60433

Phone: (815) 727-8697

Fax: (815) 740-8148

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: None

William "Kip" Hillman, Psy.D.

Name & Main Office Address: William "Kip" Hillman, Psy.D.
4064 N. Lincoln, #290
Chicago, IL 60618

Phone: (312) 933-0060

Fax: (773) 989-0275

Email: kiphillman@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL Psychology 071-003686



Sex Offender Management Board Approved Provider List - By County



Will

Youth Service Bureau of Illinois Valley

Name & Main Office Address: Lisa Kay Gustafson
424 W. Madison
Ottawa, IL 61350

Phone: (815) 433-3953
Fax: (815) 433-3980
Email: lisa@ysbiv.org
Language(s): English
Licenses: IL LCPC #180-004529

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Cynthia Robinson
424 W. Madison
Ottawa, IL 61350

Phone: (815) 433-3953
Fax: (815) 433-3980
Email: cindy@ysbiv.org
Language(s): English
Licenses: IL LCSW #149-007877

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Williamson

First Judicial Circuit of Illinois-Probation & Court Services

Name & Main Office Address: Marlynn A. Frailey
201 W. Main
Marion, IL 62959

Phone: (618) 993-1840
Fax: (618) 993-1865
Email: mfrailey@firstcircuitprobation.com
Language(s): English
Licenses: CAC; IAODAPCA #6771

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Gary Lemmon and Associates, Inc.

Name & Main Office Address: Gary L. Lemmon
904 E. Main
Norris City, IL 62869

Phone: (618) 378-3010
Fax: (618) 378-2308
Email: glemmon@shawneelink.net
Language(s): English
Licenses: IL LCSW-#149-00164, Clinical Member ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Kosmicki, Ph.D., Frank X.

Name & Main Office Address: Frank X. Kosmicki, Ph.D.
231 W. Main Street
Carbondale, IL 62901

Phone: (618) 203-6730
Fax: (618) 529-3171
Email:
Language(s): English
Licenses: IL LCP #071-006668

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Linda Stover and Associates

Name & Main Office Address: Linda Stover, M.S.Ed, LCPC, CCJS, CSOTS
417 E. Calumet
Centralia, IL 62801

Phone: (618) 322-2811
Fax: (618) 532-6805
Email: lstover@netwiz.net
Language(s): English
Licenses: IL LCPC, Certified Criminal Justice Specialist, ATSA Member, Certified Sex Offender Treatment Specialist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Williamson

Michael E. Althoff, Ph.D.

Name & Main Office Address: Michael E. Althoff, Ph.D.
201 E. Main, Suite 3D
Carbondale, IL 62901

Phone: (618) 549-3587
Fax: (618) 549-2695
Email: mealthoff@aol.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCP, IL Clinical Member - ATSA

Winnebago

1st Step Center

Name & Main Office Address: Wendy L. Hall, MA, LCPC
1752 Windsor Road, Suite 205
Loves Park, IL 61111

Phone: (815) 997-5245
Fax: (815) 997-5244
Email: whls@insightbb.com

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC

Braden Counseling Center

Name & Main Office Address: Danielle Calsyn
2580 DeKalb Avenue
Sycamore, IL 60178

Phone: (815) 787-9000
Fax: (815) 787-9015
Email: dcalsyn@frontiernet.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: CADC #21278

Brown Counseling & Consulting

Name & Main Office Address: Jeffrey R. Brown
2622 Washington Avenue
Vincennes, IN 47591

Phone: (812) 887-5431
Fax: (812) 886-3010
Email: lazlo81@charter.net
Language(s): English
Licenses: ACSW; LCSW, IL #148-008300 & IN #34001119A; CADC III; ATSA

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Centregal HealthSystem/Horizons

Name & Main Office Address: Robert Meyer
527 W. South Street
Woodstock, IL 60098

Phone: (815) 338-9199
Fax: (815) 338-9205
Email: rmeyer3@charter.net
Language(s): English
Licenses: Ph.D., LCP, Fellow Academy of Forensic Psychologist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	No	All treatment provider qualifications?	No
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Clarity Counseling Center, RLLP

Name & Main Office Address: Raegan Caras
2440 Charles Street, Suite 201
Rockford, IL 61108

Phone: (815) 227-0988
Fax: (815) 227-0992
Email: raegan.clarity@sbcglobal.net

Services Provided:

Evaluations ?	No	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	No	All evaluation provider qualifications?	No
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: LCSW IL#149-010285



Sex Offender Management Board Approved Provider List - By County



Winnebago

Community Counseling Center, Ltd.

Name & Main Office Address: Jeffrey A. Martin
666 Russell Court, Suite 105
Woodstock, IL 60098

Phone: (815) 338-7749
Fax: (815) 338-7728
Email: ccc@imaxx.net
Language(s): English
Licenses: IL LCSW 149-003373

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Family Services Agency of DeKalb County, Inc.

Name & Main Office Address: Kathleen M. Alberts, MSW, LCPC
14 Health Services Drive
DeKalb, IL 60115

Phone: (815) 758-8618
Fax: (815) 758-7569
Email:
Language(s): English
Licenses: IL LCPC #180-004462; Certified Sex Offender
Tx Specialist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Family, Divorce & Mediation of Ogle County

Name & Main Office Address: Kathleen M. Alberts, MSW, LCPC
1500 West Lincoln Avenue
Rochelle, IL 61068

Phone: (815) 562-8818
Fax: (815) 562-8818
Email:
Language(s): English
Licenses: IL LCPC #180-004462; Certified Sex Offender
Tx Specialist

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Forensic Psych Associates, Ltd.

Name & Main Office Address: Robert H. Gordon, Ph.D.
203 N. LaSalle Street, #2100
Chicago, IL 60601

Phone: (312) 917-1610
Fax: (608) 756-5174
Email: rgordon@forensicpsych.com
Language(s): English
Licenses: IL LCP

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Glenwood Testing Center

Name & Main Office Address: Frank E. Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-8133
Fax: (815) 968-4656
Email: fec@juno.com
Language(s): English
Licenses: IL LCP #071-002590

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Name & Main Office Address: Kyle Cushing, Psy.D.
2823 Glenwood Avenue
Rockford, IL 61101

Phone: (815) 968-5342
Fax: (815) 968-4656
Email: drcushing@juno.com
Language(s): English
Licenses: IL LCP, Consulting Forensic Examiner

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes



Sex Offender Management Board Approved Provider List - By County



Winnebago

Jeffrey B. Sundberg

Name & Main Office Address: Jeffrey B. Sundberg
P. O. Box 17044, 610 A East State Street
Rockford, IL 61110

Phone: (815) 332-8342

Fax: (815) 332-8342

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW #149-003876, ACSW, ATSA Member

Latino Family Services, P.C.

Name & Main Office Address: Arturo Hurtado, LCSW, ACSW
825 E. Golf Road, Suite 1133
Arlington Heights, IL 60005-5200

Phone: (847) 593-7077

Fax: (847) 593-7056

Email:

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English, Spanish

Licenses: IL LCSW-#149-005124, ACSW, ATSA Clinical Member

UIC College of Medicine-University Psychiatric Services

Name & Main Office Address: J. Geoffrey Magnus
1601 Parkview Avenue
Rockford, IL 61107

Phone: (815) 395-5870

Fax: (815) 395-5750

Email: gmagnus@uic.edu

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCSW 149-001110; WI LCSW 2262 123; IL CAC III; WI CADA III; Clinical Member ATSA; IL ATSA; WI Sex Offender Tx Network

Welch, Psy.D., William H.

Name & Main Office Address: William H. Welch, Psy.D.
810 E. State Street, Suite 304
Rockford, IL 61104

Phone: (815) 316-7604

Fax: (815) 316-7614

Email: neuropsychd@gmail.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCP, ATSA Clinical Member, IL ATSA, CSOTS

Winston J. Hopkins

Name & Main Office Address: Winston J. Hopkins
404 Midland Lane
Monona, WI 53716

Phone: (608) 221-2586

Fax:

Email: winstonkarelyn@charter.net

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: WI LPC 2503-125; Lic. Advanced Practice Social Worker

Woodford

Art Therapy and Counseling Services

Name & Main Office Address: Laurie A. Cox
101 E. College Avenue, Suite D
Normal, IL 61761

Phone: (309) 452-5326

Fax: (309) 452-5356

Email: coxlaurie@msn.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English

Licenses: IL LCPC, CADC



Sex Offender Management Board Approved Provider List - By County



Woodford

Lutheran Social Services of Illinois

Name & Main Office Address: Dee Ann Foss
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x271
Fax: (309) 671-0503
Email: deeanne.foss-reimers@lssi.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC

Name & Main Office Address: Yvonne Wojtalik
3000 W. Rohmann West
Peoria, IL 61604

Phone: (309) 671-0300 x245
Fax: (309) 671-0503
Email: yvonne.wojtalik@lssi.org

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC

P. F. Dover Counseling, LLC

Name & Main Office Address: James R. Seavey
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 495-4924
Fax: (309) 495-4993
Email: jspfdovercounseling@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC #180-001434

Name & Main Office Address: Scott A. Smith
538 N. Cherry Street
Galesburg, IL 61401

Phone: (309) 477-2278
Fax: (309) 477-3113
Email: sspfdovercounseling@yahoo.com

Services Provided:

Evaluations ?	Yes	Provider Meets the following qualifications:	
Treatment ?	Yes	All treatment provider qualifications?	Yes
Adult ?	Yes	All evaluation provider qualifications?	Yes
Juvenile ?	Yes	All applicant attestation qualifications:	Yes

Language(s): English
Licenses: IL LCPC